

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

JOHNSON FOR CONGRESS

ADDRESS (number and street)

PO BOX 14496

Check if different than previously reported. (ACC)

POLAND

OH

44514

2. FEC IDENTIFICATION NUMBER ▼

C C00476820

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

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 2014

through

M M /

D D /

Y Y Y Y 2014

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 PERRY J CHICKONOSKI

Signature of Treasurer PERRY J CHICKONOSKI

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2014

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
JOHNSON FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	296741.00	2043422.50
(b) Total Contribution Refunds (from Line 20(d))	3800.00	12385.12
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	292941.00	2031037.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1069491.93	1764396.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	364.57	509.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1069127.36	1763886.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	430107.00	
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

JOHNSON FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	103740.00	828933.53
(ii) Unitemized.....	10336.00	71913.10
(iii) TOTAL of contributions from individuals ▶	114076.00	900846.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	182665.00	1129244.20
(d) The Candidate.....	0.00	13331.67
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	296741.00	2043422.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	25106.81
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.).....	364.57	509.74
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.95	6.70
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	297106.52	2069045.75

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1069491.93	1764396.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	173.08
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	15000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	15000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2800.00	11385.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3800.00	12385.12
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1073291.93	1791954.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1206292.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	297106.52
25. SUBTOTAL (add Line 23 and Line 24).....	1503398.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1073291.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	430107.00

**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 5 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANTHONY J ALEXANDER

Mailing Address 2936 IRONWOOD DR

City AKRON State OH Zip Code 44312

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

Name of Employer FIRST ENERGY Occupation EXECUTIVE

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
 07 / 18 / 2014

Transaction ID : SA11AI.94985

Amount of Each Receipt this Period
2600.00

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

Mailing Address 51315 FIELDSTONE DR

City E LIVERPOOL State OH Zip Code 43920

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

Name of Employer AMATO LAW OFFICE Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.95021

Amount of Each Receipt this Period
150.00

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

Mailing Address 51315 FIELDSTONE DR

City E LIVERPOOL State OH Zip Code 43920

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

Name of Employer AMATO LAW OFFICE Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95075

Amount of Each Receipt this Period
150.00

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

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

2900.00

**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 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JON AMBROSE		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 04 / 2014
Mailing Address P.O. BOX 2860		Transaction ID : SA11AI.95356
City GREER	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer PRAESIDIUM CONSTRUCTION COMPANY	Occupation PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. DAVE ARCHER		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2014
Mailing Address 319 ARCHER RD		Transaction ID : SA11AI.95029
City LOWELL	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

Full Name (Last, First, Middle Initial) C. ARLENE ARCHER		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2014
Mailing Address 319 ARCHER RD		Transaction ID : SA11AI.95028
City LOWELL	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer RIVERVIEW INDUSTRIAL SUPPLY	Occupation EXECUTIVE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

SUBTOTAL of Receipts This Page (optional).....	7600.00
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: (check only one)	PAGE 7 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARY J ARMENTROUT

Mailing Address 105 CARAPLACE

City WINTERSVILLE State OH Zip Code 43953

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

Name of Employer JACK A ALLEN INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95292

Amount of Each Receipt this Period
500.00

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

Mailing Address 1261 LAUREL RIDGE RD

City LOWELL State OH Zip Code 45744

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

Name of Employer BABCOCK FENCE COMPANY Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.95375

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES J. BAKER

Mailing Address 45485 STATE ROUTE 145

City LEWISVILLE State OH Zip Code 43754

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

Name of Employer BAKER & SONS EQUIPT. CO. Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95290

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 8 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PATRICK H BALL

Mailing Address 322 BURLINGTON RD.

City JACKSON State OH Zip Code 45640

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

Name of Employer JACKSON INSURANCE BROKERAGE Occupation OWNER

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
 09 / 29 / 2014

Transaction ID : SA11AI.95388

Amount of Each Receipt this Period
250.00

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

Mailing Address 3107 SUNSET BLVD

City STEUBENVILLE State OH Zip Code 43952

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.95171

Amount of Each Receipt this Period
500.00

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

Mailing Address 27 QUICK STREAM PL

City SPRING State TX Zip Code 77381

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

Name of Employer CHENIERE ENERGY, INC. Occupation VP TAX

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.95353

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 9 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) BRIAN BENYO		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 14020 BERLIN STATION RD		Transaction ID : SA11AI.94804
City BERLIN CENTER	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4800.00
Name of Employer BRILEX INDUSTRIES	Occupation EXECUTIVE	[MEMO ITEM]
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800.00	

Full Name (Last, First, Middle Initial) BRIAN BENYO		Date of Receipt MM / DD / YYYY 07 / 21 / 2014
Mailing Address 14020 BERLIN STATION RD		Transaction ID : SA11AI.95965
City BERLIN CENTER	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00
Name of Employer BRILEX INDUSTRIES	Occupation EXECUTIVE	[MEMO ITEM] REATTRIBUTED TO BENYO, DEBORAH
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) DEBORAH BENYO		Date of Receipt MM / DD / YYYY 07 / 21 / 2014
Mailing Address 14020 BERLIN STATION RD		Transaction ID : SA11AI.95966
City BERLIN CENTER	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer NONE	Occupation HOUSEWIFE	[MEMO ITEM] REATTRIBUTED FROM BENYO, BRIAN
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.94804

REQUEST FOR RE-ATTIBUTION LETTER SENT ON 7/5/2014.

Form/Schedule:

Transaction ID:

**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 11 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIC PASCAL BESCHER

Mailing Address 1645 VINE ST.
503

City LOS ANGELES State CA Zip Code 90028

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

Name of Employer PROFESSOR Occupation UCLA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : SA11AI.95093

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES M. BLACK

Mailing Address 632 LOVERS LANE

City BEVERLY State OH Zip Code 45715

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

Name of Employer RETIRED Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.95259

Amount of Each Receipt this Period
50.00

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

Mailing Address 197 HOMESTEAD DR

City COLUMBIANA State OH Zip Code 44408

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

Name of Employer COLUMBIANA Occupation MAYOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95109

Amount of Each Receipt this Period
300.00

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

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

850.00

**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 12 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT BOSS

Mailing Address 109 ALFRED DR

City WINTERSVILLE State OH Zip Code 43953

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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.95347

Amount of Each Receipt this Period
200.00

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

Mailing Address PO BOX 109

City JACKSON State OH Zip Code 45640

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 12 / 2014

Transaction ID : SA11AI.95050

Amount of Each Receipt this Period
50.00

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

Mailing Address PO BOX 109

City JACKSON State OH Zip Code 45640

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.95166

Amount of Each Receipt this Period
500.00

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

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

750.00

**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 13 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PATRICK BROE

Mailing Address **252 CLAYTON STREET**

City **DENVER** State **CO** Zip Code **80206**

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

Name of Employer **THE BROE GROUP** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95089

Amount of Each Receipt this Period
2600.00

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

Mailing Address **15 GRAND MANOR**

City **SUGAR LAND** State **TX** Zip Code **77479**

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

Name of Employer **BLACKHAWK SPECIALTY TOOLS** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 06 / 2014

Transaction ID : SA11AI.95153

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DR KEITH D BURGETT DVM

Mailing Address **1246 ANTIGUA RD. SW**

City **CARROLLTON** State **OH** Zip Code **44615**

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

Name of Employer **CARROLLTON ANIMAL HOSPITAL** Occupation **VETERINARIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.95302

Amount of Each Receipt this Period
500.00

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

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

4100.00

**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 14 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANTHONY M CAFARO

Mailing Address **2445 BELMONT AVENUE**

City **YOUNGSTOWN** State **OH** Zip Code **44505**

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

Name of Employer **CAFARO COMPANY** Occupation **REAL ESTATE DEVELOPER - RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95063

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RONALD M CAMERON

Mailing Address **P.O. BOX 21440**

City **LITTLE ROCK** State **AR** Zip Code **72221**

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

Name of Employer **MOUNTAIRE CORP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11AI.94980

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
CARROLL COUNTY REPUBLICAN CENTRAL AND EXECUTIVE COMMITTEE

Mailing Address **147 AIRPORT RD SE**

City **CARROLLTON** State **OH** Zip Code **44615**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 12 / 2014

Transaction ID : SA11AI.95047

Amount of Each Receipt this Period
1000.00

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

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

4600.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 15 OF 166

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRISTYANN CHAVEZ

Mailing Address 114 PINEVIEW CIR

City MARIETTA State OH Zip Code 45750

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

Name of Employer CONDEVCO Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3750.00

Date of Receipt
 09 / 08 / 2014

Transaction ID : SA11AI.95270

Amount of Each Receipt this Period
 2000.00

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

Mailing Address 114 PINEVIEW CIR

City MARIETTA State OH Zip Code 45750

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

Name of Employer CONDEVCO Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3750.00

Date of Receipt
 09 / 08 / 2014

Transaction ID : SA11AI.95271

Amount of Each Receipt this Period
 -900.00

[MEMO ITEM]
 REATTRIBUTED TO CHAVEZ, BRIAN

C. Full Name (Last, First, Middle Initial)
BRIAN M CHAVEZ

Mailing Address 114 PINEVIEW CIRCLE

City MARIETTA State OH Zip Code 45750

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

Name of Employer CONDEVCO Occupation ONWER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 920.00

Date of Receipt
 09 / 08 / 2014

Transaction ID : SA11AI.95272

Amount of Each Receipt this Period
 900.00

[MEMO ITEM]
 REATTRIBUTED FROM CHAVEZ, CHRISTYANN

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIAN M CHAVEZ

Mailing Address 114 PINEVIEW CIRCLE

City State Zip Code
MARIETTA OH 45750

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

Name of Employer Occupation
CONDEVCO ONWER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
920.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 08 2014

Transaction ID : SA11AI.95933

Amount of Each Receipt this Period
20.00

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

Mailing Address 6425 MASON DIXON HWY

City State Zip Code
BLACKSVILLE WV 26521

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

Name of Employer Occupation
CB TRUCKING INC. CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 08 2014

Transaction ID : SA11AI.95169

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
RAYMOND M. CHOREY

Mailing Address 1346 FOREST AVE.

City State Zip Code
CAMBRIDGE OH 43725

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

Name of Employer Occupation
SOUTHEASTERN HOSPITAL CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 23 2014

Transaction ID : SA11AI.95333

Amount of Each Receipt this Period
150.00

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

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

270.00

**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 17 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN R CIELEC

Mailing Address 66 PRIVATE DRIVE

City State Zip Code
CHESAPEAKE OH 45619

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

Name of Employer Occupation
MCDONALDS FRANCHISE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95275

Amount of Each Receipt this Period
500.00

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

Mailing Address 2645 BUTTERNUT LANE

City State Zip Code
PEPPER PIKE OH 44124

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

Name of Employer Occupation
PRN FUNDING LLC MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.95373

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT M DANIELS

Mailing Address 2350 ASBURY CHAPEL RD.

City State Zip Code
ZANESVILLE OH 43701

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.95339

Amount of Each Receipt this Period
100.00

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

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

1100.00

**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 18 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN E DEHMLOW

Mailing Address **611 4TH STREET**

City **MARIETTA** State **OH** Zip Code **45750**

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

Name of Employer **COMFORT KEEPERS** Occupation **COMMUNITY LIAISON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.95263

Amount of Each Receipt this Period
100.00

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

Mailing Address **10550 SHARROTT RD**

City **NORTH LIMA** State **OH** Zip Code **44452**

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

Name of Employer **BOARDMAN STEEL INC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95967

Amount of Each Receipt this Period
75.00

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

Mailing Address **4101 SOUTHWESTERN STREET**

City **HOUSTON** State **TX** Zip Code **77005**

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

Name of Employer **ANDREWS KURT** Occupation **LAWYER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.95358

Amount of Each Receipt this Period
500.00

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

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

675.00

**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 19 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVE DICKEY

Mailing Address 49096 EAGLE DR

City EAST LIVERPOOL State OH Zip Code 43920

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

Name of Employer DW DICKEY & SON, INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.95105

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ALFRED L DOHERTY

Mailing Address 87420 COUCH RD.

City JEWETT State OH Zip Code 43986

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
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95294

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ALFRED L DOHERTY

Mailing Address 87420 COUCH RD.

City JEWETT State OH Zip Code 43986

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
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.95327

Amount of Each Receipt this Period
200.00

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

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

1300.00

**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 20 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUJEETH DRAKSHARAM

Mailing Address 3100 TIMMONS LANE SUITE 500

City HOUSTON State TX Zip Code 77027

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

Name of Employer SIRRUS ENGINEERS, INC. Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95154

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN W DUNNING

Mailing Address 5172 COLLEGE HILL RD.

City CAMBRIDGE State OH Zip Code 43725

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

Name of Employer DUNNING MOTOR CARS Occupation AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95408

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JOSEPH R EULBERG

Mailing Address 8095 ROOKERY WAY

City WESTERVILLE State OH Zip Code 43082

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

Name of Employer BOB EVANS FARMS, INC. Occupation EXECUTIVE

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
 08 / 26 / 2014

Transaction ID : SA11AI.95113

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 21 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANATOL FEYGIN

Mailing Address **84 MAPLE AVE., SOUTH**

City **WESTPORT** State **CT** Zip Code **06880**

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

Name of Employer **CHENIERE ENERGY** Occupation **SVP**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.95366

Amount of Each Receipt this Period
1000.00

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

Mailing Address **PO BOX 87**

City **WARM SPRINGS** State **VA** Zip Code **24484**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.95350

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
COL MARK C FLAKE IV, RET

Mailing Address **1741 PEARCE CIR**

City **SALEM** State **OH** Zip Code **44460**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.95321

Amount of Each Receipt this Period
50.00

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

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

1300.00

**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 22 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE FOWLER

Mailing Address 26239 NORTH ST

City: COOLVILLE State: OH Zip Code: 45723

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: 550.00

Date of Receipt: 09 / 23 / 2014

Transaction ID : SA11AI.95330

Amount of Each Receipt this Period: 100.00

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

Mailing Address 42 W. BROAD OAKS

City: HOUSTON State: TX Zip Code: 77056

FEC ID number of contributing federal political committee: C

Name of Employer: M3 MIDSTREAM Occupation: EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 16 / 2014

Transaction ID : SA11AI.95367

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 430 TWO RIDGE RD

City: WINTERSVILLE State: OH Zip Code: 43953

FEC ID number of contributing federal political committee: C

Name of Employer: RALPH D FRESHWATER PROPERTIES Occupation: EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 07 / 22 / 2014

Transaction ID : SA11AI.94999

Amount of Each Receipt this Period: 100.00

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

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

1200.00

**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 23 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RALPH FRESHWATER		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 430 TWO RIDGE RD		Transaction ID : SA11AI.95329	
City WINTERSVILLE	State OH	Zip Code 43953	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RALPH D FRESHWATER PROPERTIES	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) B. RALPH FRESHWATER		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 430 TWO RIDGE RD		Transaction ID : SA11AI.95414	
City WINTERSVILLE	State OH	Zip Code 43953	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RALPH D FRESHWATER PROPERTIES	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00		

Full Name (Last, First, Middle Initial) C. GAYLE GALAN		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 625 WARREN CHAPEL RD		Transaction ID : SA11AI.95162	
City FLEMING	State OH	Zip Code 45729	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer MARIETTA MEMORIAL HOSPITAL	Occupation PHYSICIAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3400.00		

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	600.00

**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 24 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID GANO

Mailing Address 343 HIGHLAND AVE

City SALEM State OH Zip Code 44460

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

Name of Employer TRUE CUT INDUSTRIAL Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95067

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
WILLIAM J GARTLAND

Mailing Address 6631 ABBOTT ST.

City AUSTINTOWN State OH Zip Code 44515

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

Name of Employer WILLIAM J GARTLAND & ASSOCIATES Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11AI.94962

Amount of Each Receipt this Period
300.00

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

Mailing Address 491 MILLBROOK

City CANFIELD State OH Zip Code 44406

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

Name of Employer HAPCO, INC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.95023

Amount of Each Receipt this Period
1000.00

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

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

1450.00

**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 25 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEOFFREY GOLL

Mailing Address **PO BOX 92**

City **SALEM** State **OH** Zip Code **44460**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : SA11AI.95024

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
JOHN CINRAD GRISHAM

Mailing Address **105 MILL CREEK DR**

City **YOUNGSTOWN** State **OH** Zip Code **44512**

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

Name of Employer **RETIRED** Occupation **MINING EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 17 / 2014

Transaction ID : SA11AI.95106

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MARK E GUY

Mailing Address **2080 NEELD RD**

City **EAST PALESTINE** State **OH** Zip Code **44413**

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

Name of Employer **COLUMBIANA COUNTY** Occupation **BOARD OF ELECTIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95074

Amount of Each Receipt this Period
35.00

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

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

385.00

**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 26 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NORMAN HAESSLY

Mailing Address 389 SHEETS RUN RD

City MARIETTA State OH Zip Code 45750

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

Name of Employer HAESSLY HARDWOOD LUMBER Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1525.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95405

Amount of Each Receipt this Period
75.00

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

Mailing Address 17124 STATE ROUTE 152

City TORONTO State OH Zip Code 43964

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95303

Amount of Each Receipt this Period
250.00

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

Mailing Address 17124 STATE ROUTE 152

City TORONTO State OH Zip Code 43964

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.95346

Amount of Each Receipt this Period
25.00

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

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

350.00

**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 27 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LARRY R. HAWN		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 111 MARIGOLD LN		Transaction ID : SA11AI.95168	
City MARIETTA	State OH	Zip Code 45750	Amount of Each Receipt this Period _____ 150.00
FEC ID number of contributing federal political committee.		C	
Name of Employer BEIGHT-HAWN INSURANCE	Occupation INSURANCE AGENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) B. NEA S HENRY		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address P.O. BOX 706		Transaction ID : SA11AI.95381	
City JACKSON	State OH	Zip Code 45640	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer APPALACHIA REALTY	Occupation REAL ESTATE AGENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. JACK HILL		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address 10008 MAGNOLIA BEND DR		Transaction ID : SA11AI.95069	
City BONITA SPRINGS	State FL	Zip Code 34135	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HILL INTERNATIONAL TRUCKS	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1650.00
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: (check only one)	PAGE 28 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWIN HISSA

Mailing Address P.O. BOX 67

City JACKSON State OH Zip Code 45640

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

Name of Employer HOLZER CONSOLIDATED Occupation SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95932

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
NANCY P HOLLISTER

Mailing Address 613 SIXTH ST.

City MARIETTA State OH Zip Code 45750

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 **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95314

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD A HORVITZ

Mailing Address 6095 PARKLAND BLVD
SUITE 300

City MAYFIELD HEIGHTS State OH Zip Code 44124

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

Name of Employer MORELAND MANAGEMENT CO Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.95237

Amount of Each Receipt this Period
1000.00

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

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

1700.00

**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 29 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL HORVITZ

Mailing Address 1001 LAKESIDE AVE. #900

City State Zip Code
CLEVELAND OH 44114

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

Name of Employer Occupation
PARKLAND MANAGEMENT ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.95238

Amount of Each Receipt this Period
500.00

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

Mailing Address 1865 BUGLE LN

City State Zip Code
CLEARWATER FL 33764

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

Name of Employer Occupation
LAKEVIEW BAPTIST CHURCH ASSOCIATE PASTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.95094

Amount of Each Receipt this Period
25.00

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

Mailing Address 1865 BUGLE LN

City State Zip Code
CLEARWATER FL 33764

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

Name of Employer Occupation
LAKEVIEW BAPTIST CHURCH ASSOCIATE PASTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.95110

Amount of Each Receipt this Period
25.00

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

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

550.00

**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 30 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS HUDGINS

Mailing Address 1865 BUGLE LN

City CLEARWATER State FL Zip Code 33764

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

Name of Employer LAKEVIEW BAPTIST CHURCH Occupation ASSOCIATE PASTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95369

Amount of Each Receipt this Period
25.00

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

Mailing Address 1210 HIRAM W RD

City WELLSTON State OH Zip Code 45692

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.95165

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAMES E HUNT

Mailing Address 39266 CRESTVIEW RD

City LEETONIA State OH Zip Code 44431

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

Name of Employer RUN AWAY FARM Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11AI.95007

Amount of Each Receipt this Period
100.00

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

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

375.00

**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 31 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUNTON & WILLIAMS LLP

Mailing Address 2200 PENNSYLVANIA AVENUE, NW

City WASHINGTON State DC Zip Code 20037

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

Name of Employer Occupation
PARTNERSHIP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95244

Amount of Each Receipt this Period
1000.00

CONTRIBUTION SPLIT BETWEEN 235 PARTNERS

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

Mailing Address 2927 AVENUE D

City KATY State TX Zip Code 77493

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

Name of Employer Occupation
INQUEST, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95146

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOHN G JONES

Mailing Address 357 PEARL ST.

City JACKSON State OH Zip Code 45640

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

Name of Employer Occupation
THE MILTON BANK PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95288

Amount of Each Receipt this Period
500.00

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

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

2500.00

**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 32 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAY KARR

Mailing Address 44671 WIPPLE RD

City POMEROY State OH Zip Code 45769

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

Name of Employer KINSALE CORPORATION Occupation GENERAL CONTRACTOR

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
 07 / 30 / 2014

Transaction ID : SA11AI.95099

Amount of Each Receipt this Period
250.00

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

Mailing Address 420 RAVINE

City HUBBARD State OH Zip Code 44425

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

Name of Employer PI&I MOTOR EXPRESS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.95020

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2502 FIVE POINTS RD

City JACKSON State OH Zip Code 45640

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

Name of Employer RELIABLE STAFFING SERVICES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95279

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 33 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VIRGINIA CONSTANCE KNECHT

Mailing Address 1716 FONTENAY PL.

City: WILMINGTON State: NC Zip Code: 28405

FEC ID number of contributing federal political committee: C

Name of Employer: WENDEL AUGUST FORGE Occupation: EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 23 / 2014

Transaction ID : SA11AI.95344

Amount of Each Receipt this Period: 200.00

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

Mailing Address 51986 WHITE PINE DRIVE

City: SAINT CLAIRSVILLE State: OH Zip Code: 43950

FEC ID number of contributing federal political committee: C

Name of Employer: SELF Occupation: MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 09 / 22 / 2014

Transaction ID : SA11AI.95299

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
CLIFTON W KULHANEK

Mailing Address 322 BILLINGFORD DR

City: KATY State: TX Zip Code: 77450

FEC ID number of contributing federal political committee: C

Name of Employer: INQUEST, INC. Occupation: OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 09 / 06 / 2014

Transaction ID : SA11AI.95147

Amount of Each Receipt this Period: 2600.00

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

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

3300.00

**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 34 OF 166
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LINDSAY B KULHANEK		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 322 BILLINGSFORD DR.		Transaction ID : SA11AI.95148	
City KATY	State TX	Zip Code 77450	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) B. SIVA LAGISETTY		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 32087 HAMILTON CT APT 303		Transaction ID : SA11AI.95359	
City SOLON	State OH	Zip Code 44139	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer STONERIDGE, INC.	Occupation GLOBAL IT/ERP DEVELOPMENT MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. JOHN LANG		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 13150 WATERFORD RD		Transaction ID : SA11AI.95160	
City WATERFORD	State OH	Zip Code 45786	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 435.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2950.00
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: (check only one)	PAGE 35 OF 166
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOHN LANG		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 13150 WATERFORD RD		Transaction ID : SA11AI.95316	
City WATERFORD	State OH	Zip Code 45786	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 485.00		

Full Name (Last, First, Middle Initial) B. ROBERT LEHMAN		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 110 GLENWOOD LN		Transaction ID : SA11AI.95310	
City MARIETTA	State OH	Zip Code 45750	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) C. JOHN LEWIS		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014	
Mailing Address 42021 WOODLAND LA		Transaction ID : SA11AI.95003	
City BELMONT	State OH	Zip Code 43718	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 400.00
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 36 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ZEB LOCKLEAR

Mailing Address **24 MAPLEHILL RD**

City **SALINEVILLE** State **OH** Zip Code **43945**

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
205.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.95164

Amount of Each Receipt this Period
35.00

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

Mailing Address **543 WESTMINSTER DRIVE**

City **HOUSTON** State **TX** Zip Code **77024**

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

Name of Employer **OASIS PETROLEUM** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.95357

Amount of Each Receipt this Period
500.00

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

Mailing Address **3333 ALLEN PARKWAY UNIT 2109**

City **HOUSTON** State **TX** Zip Code **77019**

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

Name of Employer **CHENIERE ENERGY** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 06 / 2014

Transaction ID : SA11AI.95144

Amount of Each Receipt this Period
500.00

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

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

1035.00

**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 37 OF 166
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DENISE MACKALL		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address PO BOX 567		Transaction ID : SA11AI.95026	
City NORTH LIMA	State OH	Amount of Each Receipt this Period 1450.00	
Zip Code 44452			
FEC ID number of contributing federal political committee. C			
Name of Employer VALLEY FORGE INC	Occupation CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) B. W THOMAS MACKALL		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 10900 SOUTH AVE		Transaction ID : SA11AI.95025	
City NORTH LIMA	State OH	Amount of Each Receipt this Period 1550.00	
Zip Code 44452			
FEC ID number of contributing federal political committee. C			
Name of Employer EAST FAIRFIELD COAL COMPANY	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4300.00		

Full Name (Last, First, Middle Initial) C. ALBERT MACRE		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 2017 SUNSET BLVD		Transaction ID : SA11AI.95117	
City STEUBENVILLE	State OH	Amount of Each Receipt this Period 200.00	
Zip Code 43952			
FEC ID number of contributing federal political committee. C			
Name of Employer ALBERT F MACRE & CO	Occupation CPA		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

SUBTOTAL of Receipts This Page (optional).....	3200.00
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: (check only one)	PAGE 38 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALICE MARTIG

Mailing Address 10702 STATE ROUTE 534

City State Zip Code
BELOIT OH 44609

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

Name of Employer Occupation
SELF FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.95324

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
ERIK D MASSIE

Mailing Address 9405 FOUR MILE RD

City State Zip Code
JACKSON OH 45640

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

Name of Employer Occupation
GEIGER BROTHERS CONSTRUCTION & EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95391

Amount of Each Receipt this Period
500.00

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

Mailing Address 3050 KINGSRIDGE DRIVE

City State Zip Code
EAST LIVERPOOL OH 43920

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

Name of Employer Occupation
THE HOMER LAUGHLIN CHINA CO. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1899.60

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11AI.94965

Amount of Each Receipt this Period
300.00

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

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

900.00

**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 39 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AARON MICHAEL

Mailing Address **PO BOX 213**
150 LINCOLN STREET

City **OAK HILL** State **OH** Zip Code **45656**

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

Name of Employer **ATOMIC CREDIT UNION** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.95371

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROBERT P MILICH

Mailing Address **832 BEARS DEN RD**

City **YOUNGSTOWN** State **OH** Zip Code **44511**

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

Name of Employer **CITY OF YOUNGSTOWN** Occupation **MUNICIPAL COURT JUDGE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 08 / 2014

Transaction ID : SA11AI.95034

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
ROBERT P MILICH

Mailing Address **832 BEARS DEN RD**

City **YOUNGSTOWN** State **OH** Zip Code **44511**

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

Name of Employer **CITY OF YOUNGSTOWN** Occupation **MUNICIPAL COURT JUDGE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95059

Amount of Each Receipt this Period
150.00

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 40 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARRY A MINER

Mailing Address 2190 CRICKET LANE

City State Zip Code
COLUMBIANA OH 44408

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

Name of Employer Occupation
PIPELINES, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95072

Amount of Each Receipt this Period
300.00

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

Mailing Address 1040 COLONIAL DRIVE

City State Zip Code
YOUNGSTOWN OH 44505

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

Name of Employer Occupation
HOSPICE & COMFORT KEEPERS REGISTERED NURSE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95308

Amount of Each Receipt this Period
500.00

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

Mailing Address 206 WATTS BLEVINS RD.

City State Zip Code
JACKSON OH 45640

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

Name of Employer Occupation
MONTGOMERY MACHINE & FABRICATION, II EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.95281

Amount of Each Receipt this Period
1000.00

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

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

1800.00

**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 41 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK MUNROE

Mailing Address **PO BOX 503**

City **COLUMBIANA** State **OH** Zip Code **44408**

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

Name of Employer **COMPCO INDUSTRIES** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95070

Amount of Each Receipt this Period
150.00

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

Mailing Address **220 KERN DR.**

City **MARIETTA** State **OH** Zip Code **45750**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11AI.94970

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FRANK MURPHY III

Mailing Address **2602 EAST 28TH ST.**

City **TULSA** State **OK** Zip Code **74114**

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

Name of Employer **CHESAPEAKE CAPITAL GROUP** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.95370

Amount of Each Receipt this Period
2600.00

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

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

3750.00

**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 42 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENRY NEMENZ

Mailing Address 8518 TWIN OAKS CT

City POLAND State OH Zip Code 44514

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

Name of Employer HP NEMENZ FOOD INC. Occupation RETAIL FOOD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.95155

Amount of Each Receipt this Period
100.00

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

Mailing Address 419 FIFTH ST

City MARIETTA State OH Zip Code 45750

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

Name of Employer SELF Occupation DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95266

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
THOMAS B NUSZ

Mailing Address 11 WILLOWEND DR

City HOUSTON State TX Zip Code 77024

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

Name of Employer OASIS PETROLEUM Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.95137

Amount of Each Receipt this Period
5200.00

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

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

5350.00

**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 43 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS B NUSZ

Mailing Address 11 WILLOWEND DR

City HOUSTON State TX Zip Code 77024

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

Name of Employer OASIS PETROLEUM Occupation EXECUTIVE

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
 09 / 12 / 2014

Transaction ID : SA11AI.95138

Amount of Each Receipt this Period
-2600.00

[MEMO ITEM]
REATTRIBUTED TO NUSZ, TERRI

B. Full Name (Last, First, Middle Initial)
TERRI L NUSZ

Mailing Address 11 WILLOWEND DR.

City HOUSTON State TX Zip Code 77024

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

Name of Employer NONE Occupation HOMEMAKER

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
 09 / 12 / 2014

Transaction ID : SA11AI.95139

Amount of Each Receipt this Period
2600.00

[MEMO ITEM]
REATTRIBUTED FROM NUSZ, THOMAS

C. Full Name (Last, First, Middle Initial)
PATRICIA A OUTTRIM

Mailing Address 914 MAIN ST #2005

City HOUSTON State TX Zip Code 77002

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

Name of Employer CHENIERE ENERGY Occupation VP GOVERNMENT & REGULATORY AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95142

Amount of Each Receipt this Period
1000.00

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

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

1000.00

**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 44 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRAVEEN PANCHAKARLA

Mailing Address 1128 RANCH VISTA DR

City IRVING State TX Zip Code 75063

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

Name of Employer PRUDENT CONSULTING Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.95355

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LAWRENCE A. PARKER

Mailing Address 1385 MANOR DR

City SALEM State OH Zip Code 44460

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

Name of Employer MANOR LEASING Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.95044

Amount of Each Receipt this Period
100.00

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

Mailing Address 624 THIRD ST

City MARIETTA State OH Zip Code 45750

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

Name of Employer MARIETTA MEMORIAL HOSPITAL Occupation DIRECTOR OF NURSING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95265

Amount of Each Receipt this Period
250.00

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

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

850.00

**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 45 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANNETTE PARNELL

Mailing Address 1401 N 13TH STREET

City CAMBRIDGE State OH Zip Code 43725

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

Name of Employer PARNELL AND ASSOCIATES, INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95080

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
RENATO F PEREIRA

Mailing Address 6310 AUDEN ST.

City HOUSTON State TX Zip Code 77005

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

Name of Employer CHENIERE ENERGY Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95150

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1464 CALDER RIDGE RD.

City BELPRE State OH Zip Code 45714

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

Name of Employer SELF Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95267

Amount of Each Receipt this Period
250.00

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

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

1350.00

**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 46 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANITA LYN PETRELLA

Mailing Address 200 BRAYBARTON BLVD

City State Zip Code
STEUBENVILLE OH 43952

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

Name of Employer Occupation
JB GREEN TEAM DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95301

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM J PETTA

Mailing Address 299 S. MAIN ST.

City State Zip Code
MANSFIELD PA 16933

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

Name of Employer Occupation
PETTA ENTERPRISES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95157

Amount of Each Receipt this Period
2000.00

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

Mailing Address 15 NORMANDY DR.

City State Zip Code
WINTERSVILLE OH 43953

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

Name of Employer Occupation
NONE NONE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.95368

Amount of Each Receipt this Period
500.00

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

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

3000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.95157

EXCESSIVE CONTRIBUTION OF \$1,300 REFUNDED ON 10/15/2014 VIA CHECK #1575

Form/Schedule:

Transaction ID:

**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 48 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARY POWELL

Mailing Address 233 ROCK LAKE RD.

City FAIRMONT State WV Zip Code 26554

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

Name of Employer MARION ELECTRIC CO. Occupation ELECTRICAL ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11AI.95009

Amount of Each Receipt this Period
50.00

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

Mailing Address 2065 TREMONT ROAD

City UPPER ARLINGTON State OH Zip Code 43221

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

Name of Employer ICE MILLER Occupation EXECUTIVE

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
08 / 20 / 2014

Transaction ID : SA11AI.95092

Amount of Each Receipt this Period
250.00

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

Mailing Address 50 PUBLIC SQUARE #1600

City CLEVELAND State OH Zip Code 44113

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

Name of Employer FOREST CITY ENTERPRISES Occupation REAL ESTATE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11AI.95256

Amount of Each Receipt this Period
1000.00

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

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

1300.00

**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 49 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT H RAUCH

Mailing Address 3565 WATERTOWN RD

City WATERFORD State OH Zip Code 45786

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

Name of Employer AEP Occupation FIELD REP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95261

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
ROBERT H RAUCH

Mailing Address 3565 WATERTOWN RD

City WATERFORD State OH Zip Code 45786

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

Name of Employer AEP Occupation FIELD REP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95262

Amount of Each Receipt this Period
50.00

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

Mailing Address 402 SHADYWOOD RD

City HOUSTON State TX Zip Code 77057

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

Name of Employer N/A Occupation HOMEMAKER

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
 09 / 06 / 2014

Transaction ID : SA11AI.95145

Amount of Each Receipt this Period
2600.00

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

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

2675.00

**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 50 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BETTY RICHARDS

Mailing Address 2029 STATE ROUTE 339

City State Zip Code
BELPRE OH 45714

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

Name of Employer Occupation
OH VALLEY AMBULATORY SURGERY CENTE BILLING ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95311

Amount of Each Receipt this Period
100.00

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

Mailing Address 2029 STATE ROUTE 339

City State Zip Code
BELPRE OH 45714

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

Name of Employer Occupation
OH VALLEY AMBULATORY SURGERY CENTE BILLING ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.95312

Amount of Each Receipt this Period
25.00

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

Mailing Address 418 4TH AVE

City State Zip Code
GALLIPOLIS OH 45631

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

Name of Employer Occupation
THE WISEMAN AGENCY INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.95037

Amount of Each Receipt this Period
100.00

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

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

225.00

**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 51 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. DAVID H ROBINSON

Mailing Address 1595 TOWNSHIP ROAD 212

City BLOOMINGDALE State OH Zip Code 43910

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

Name of Employer CRESTVIEW VETERINARY CLINIC Occupation VETERINARIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11AI.94966

Amount of Each Receipt this Period
200.00

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

Mailing Address 9767 S ISABEL COURT

City HIGHLANDS RANCH State CO Zip Code 80126

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

Name of Employer ERP ICG, INC Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.95364

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ANN JILL SCILEPPI

Mailing Address 2290 DUCK CREEK RD

City WHIPPLE State OH Zip Code 45788

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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.95322

Amount of Each Receipt this Period
100.00

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 52 OF 166
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) LINDA SEBO		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 1790 QUAKER LN		Transaction ID : SA11AI.95120	
City SALEM	State OH	Zip Code 44460	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer NONE		Occupation HOMEMAKER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4000.00	

Full Name (Last, First, Middle Initial) JEANETTE SHIREY		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 1234 KERR RD		Transaction ID : SA11AI.95096	
City BIDWELL	State OH	Zip Code 45614	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer GALLIPOLIS CAREER COLLEGE		Occupation EXECUTIVE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) CYNTHIA E SIPPERLY		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address 10411 HOLLOWBACK DR		Transaction ID : SA11AI.95087	
City KATY	State TX	Zip Code 77494	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00	
Name of Employer HOMEMAKER		Occupation HOMEMAKER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	4100.00
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: (check only one)	PAGE 53 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JASON A SIPPERLY

Mailing Address 10411 HOLLOWBACK DR

City State Zip Code
KATY TX 77494

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

Name of Employer Occupation
INQUEST, INC. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95088

Amount of Each Receipt this Period
2600.00

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

Mailing Address 521 FIFTH STREET

City State Zip Code
MARIETTA OH 45750

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

Name of Employer Occupation
MARIETTA HEALTH SYSTEMS PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95409

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JEFFREY A STANKUNAS

Mailing Address 432 Highbanks Valley Drive

City State Zip Code
NEWARK OH 43055

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.95273

Amount of Each Receipt this Period
250.00

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

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

3850.00

**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 54 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYMOND J STANKUNAS

Mailing Address 1570 HIGHPOINT DR.

City State Zip Code
NEWARK OH 43055

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.95274

Amount of Each Receipt this Period
250.00

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

Mailing Address 213 REDONDO DR

City State Zip Code
JACKSON OH 45640

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

Name of Employer Occupation
OHIO PRECIOUS METALS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95084

Amount of Each Receipt this Period
2000.00

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

Mailing Address 213 REDONDO DR

City State Zip Code
JACKSON OH 45640

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

Name of Employer Occupation
OHIO PRECIOUS METALS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : SA11AI.95085

Amount of Each Receipt this Period
-800.00

[MEMO ITEM]
REATTRIBUTED TO STOCKMEISTER, SUSAN

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

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

2250.00

**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 55 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN STOCKMEISTER

Mailing Address 213 REDONDO DR

City JACKSON State OH Zip Code 45640

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95086

Amount of Each Receipt this Period
800.00

**[MEMO ITEM]
REATTRIBUTED FROM STOCKMEISTER, ALAN**

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

Mailing Address 213 REDONDO DR

City JACKSON State OH Zip Code 45640

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95392

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JEFFREY DAVID STOY

Mailing Address 326 BLUEBERRY DR

City COLUMBIANA State OH Zip Code 44408

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

Name of Employer AMERICAN STEEL ERECTION CO. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95073

Amount of Each Receipt this Period
150.00

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

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

650.00

**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 56 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK STUBBE

Mailing Address 3015 CARNEGIE ST

City HOUSTON State TX Zip Code 77005

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

Name of Employer CHENIERE ENERGY Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.95151

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 348 KERR RD

City BIDWELL State OH Zip Code 45614

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

Name of Employer PHYSICIAN, HOLZER CLINIC, INC Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.95363

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
WARD J TIMKEN JR.

Mailing Address 200 MARKET AVENUE NORTH SUITE 210

City CANTON State OH Zip Code 44702

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

Name of Employer TIMKEN COMPANY Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95062

Amount of Each Receipt this Period
 2500.00

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

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

3750.00

**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 57 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SARAH TIPKA		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 1366 TERRACE RD NW		Transaction ID : SA11AI.95043	
City NEW PHILADELPHIA	State OH	Zip Code 44663	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer A W TIPKA OIL & GAS INC	Occupation LAND MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2275.00		

Full Name (Last, First, Middle Initial) B. KENNETH TRIPLETT		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 1109 BRONX CORNER RD		Transaction ID : SA11AI.95382	
City RAY	State OH	Zip Code 45672	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer OHIO PRECIOUS METALS LLC	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. JOHN WALKER		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 7 PINE GROVE CIRCLE		Transaction ID : SA11AI.95141	
City HOUSTON	State TX	Zip Code 77024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer ENERVEST LTD	Occupation CHIEF EXECUTIVE OFFICER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	3400.00
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: (check only one)	PAGE 58 OF 166
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONALD WALTERS

Mailing Address 3013 CAMBA RD

City JACKSON State OH Zip Code 45640

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

Name of Employer **FLUOR B&W** Occupation **SECURITY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95390

Amount of Each Receipt this Period
500.00

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

Mailing Address 1223 CANDLEWOOD DR

City WHEELERSBURG State OH Zip Code 45694

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
725.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95108

Amount of Each Receipt this Period
200.00

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

Mailing Address 1223 CANDLEWOOD DR

City WHEELERSBURG State OH Zip Code 45694

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
825.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.95389

Amount of Each Receipt this Period
100.00

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: PAGE 59 OF 166
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

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

Mailing Address 80 SLEEPY HOLLOW DR

City State Zip Code
CANFIELD OH 44406

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.95041

Amount of Each Receipt this Period
200.00

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

Mailing Address 619 FOURTH AVE

City State Zip Code
GALLIPOLIS OH 45631

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

Name of Employer Occupation
OHIO VALLEY BANK BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.95372

Amount of Each Receipt this Period
500.00

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

Mailing Address 20 BASSWOOD LANE

City State Zip Code
MORELAND HILLS OH 44022

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

Name of Employer Occupation
MALLARD INVESTMENTS, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.95374

Amount of Each Receipt this Period
1000.00

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

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

1700.00

**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 60 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHAD ZAMARIN

Mailing Address 20003 GABLEPOINT DRIVE

City State Zip Code
KATY TX 77450

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

Name of Employer Occupation
CHENIERE ENERGY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.95365

Amount of Each Receipt this Period
2600.00

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

Mailing Address 555 MARTIN LUTHER KING JR BLVD

City State Zip Code
YOUNGSTOWN OH 44502

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

Name of Employer Occupation
PHANTOM FIREWORKS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.95076

Amount of Each Receipt this Period
2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

4600.00

103740.00

**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 61 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address **1 N. WAUKEGAN ROAD**

City **NORTH CHICAGO** State **IL** Zip Code **60064**

FEC ID number of contributing federal political committee. **C C00536573**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95249

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Mailing Address **7575 E FULTON ROAD**
ATTN: SCOTT SMOES 56-3S

City **ADA** State **MI** Zip Code **49355**

FEC ID number of contributing federal political committee. **C C00034884**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11C.95057

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF NEUROLOGY BRAINPAC

Mailing Address **401 C ST NE**

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : SA11C.94978

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 62 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 BEACH STREET

City SAN FRANCISCO State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11C.94991

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 BEACH STREET

City SAN FRANCISCO State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95174

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY ENT PAC

Mailing Address 1650 DIAGONAL ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00306449

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11C.95124

Amount of Each Receipt this Period
 1000.00

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

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

6000.00

**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 63 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS POLITICAL ACTION COMMITTEE (PA PAC)

Mailing Address 2318 MILL ROAD
SUITE 1300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00122499

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95190

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11C.95119

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE

Mailing Address 2400 N ST NW

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95129

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 64 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11C.95015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000
ATTN: SARA MORSE

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00382424

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11C.95125

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN FOREST & PAPER ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 K STREET, NW
SUITE 700

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00029348

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11C.94979

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 65 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **PO BOX 70980**

City **WASHINGTON** State **DC** Zip Code **20024**

FEC ID number of contributing federal political committee. **C C00006080**

Name of Employer **010** Occupation **C00006080**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : SA11C.95185

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1505 PRINCE STREET SUITE 300**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : SA11C.95188

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN OSTEOPATHIC INFORMATION ASSOCIATION - OSTEOPATHIC POLITICAL ACTION COMMITTEE

Mailing Address **1090 VERMONT AVE., NW SUITE 500**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00113803**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11C.95052

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 66 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2014
A. Mailing Address 1111 NORTH FAIRFAX ST.		Transaction ID : SA11C.94990
City ALEXANDRIA	State VA	
FEC ID number of contributing federal political committee. C C00012880		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6000.00	

Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
B. Mailing Address 1111 NORTH FAIRFAX ST.		Transaction ID : SA11C.95253
City ALEXANDRIA	State VA	
FEC ID number of contributing federal political committee. C C00012880		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8000.00	

Full Name (Last, First, Middle Initial) AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2014
C. Mailing Address 9312 OLD GEORGETOWN ROAD		Transaction ID : SA11C.94993
City BETHESDA	State MD	
FEC ID number of contributing federal political committee. C C00008839		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

SUBTOTAL of Receipts This Page (optional).....	5500.00
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 67 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 18 2014

Transaction ID : SA11C.94981

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC)

Mailing Address 2200 RESEARCH BOULEVARD

City State Zip Code
ROCKVILLE MD 20850

FEC ID number of contributing federal political committee. **C** C00210666

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 19 2014

Transaction ID : SA11C.95186

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13TH STREET, NW
12TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 19 2014

Transaction ID : SA11C.95189

Amount of Each Receipt this Period
2000.00

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

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

4000.00

**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 68 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANDY THOMPSON FOR STATE REPRESENTATIVE

Mailing Address 18508 WOODSFIELD RD

City State Zip Code
CALDWELL OH 43724

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95396

Amount of Each Receipt this Period
100.00

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

Mailing Address P.O. BOX 3535

City State Zip Code
BALLWIN MO 63022

FEC ID number of contributing federal political committee. **C** C00531764

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95180

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BELMONT COUNTY REPUBLICAN PARTY

Mailing Address 67022 S ALMAR LANE

City State Zip Code
ST. CLAIRSVILLE OH 43950

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.95056

Amount of Each Receipt this Period
500.00

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

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

1600.00

**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 69 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BILL FLORES FOR CONGRESS

Mailing Address PO BOX 6207

City State Zip Code
BRYAN TX 77805

FEC ID number of contributing federal political committee. **C** C00472241

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11C.95014

Amount of Each Receipt this Period
2000.00

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

Mailing Address 228 S. WASHINGTON ST., STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00412288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.95228

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11C.94986

Amount of Each Receipt this Period
2500.00

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

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

7000.00

**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 70 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95250

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')

Mailing Address ONE BOSTON SCIENTIFIC PLACE

City State Zip Code
NATICK MA 01760

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95229

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 WESTLAKE PARK BLVD

City State Zip Code
HOUSTON TX 77079

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95134

Amount of Each Receipt this Period
1000.00

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

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

4000.00

**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 71 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BUCKEYE PATRIOT POLITICAL ACTION COMMITTEE

Mailing Address 2525 NORTH LIMESTONE STREET
SUITE 103

City Springfield State OH Zip Code 45503

FEC ID number of contributing federal political committee. **C** C00239905

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95176

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

Mailing Address 1201 15TH STREET, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11C.95038

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
BURGER KING FRANCHISEE PAC

Mailing Address 1701 BARRETT LAKES BLVD. NW
SUITE 180

City KENNESAW State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95187

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 72 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARESOURCE MANAGEMENT SERVICES, CO. PAC

Mailing Address 230 N. MAIN STREET

City State Zip Code
DAYTON OH 45402

FEC ID number of contributing federal political committee. **C** C00424879

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95232

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 12405 POWERSCOURT DRIVE

City State Zip Code
ST. LOUIS MO 63131

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.95013

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
CHESAPEAKE ENERGY CORPORATION FED-PAC

Mailing Address PO BOX 18496

City State Zip Code
OKLAHOMA CITY OK 73154

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95126

Amount of Each Receipt this Period
1500.00

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

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

4000.00

**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 73 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD
ROOM 3400

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11C.95054

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE (PATHPAC)

Mailing Address 1350 I STREET, NW
SUITE 590

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11C.94994

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITY LEADERSHIP & ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.95008

Amount of Each Receipt this Period
1000.00

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

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

7000.00

**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 74 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET, NW SUITE 300

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : SA11C.94987

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95252

Amount of Each Receipt this Period
 _____ 2000.00

C. Full Name (Last, First, Middle Initial)
DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND

Mailing Address 1000 DARDEN CENTER DRIVE

City	State	Zip Code
ORLANDO	FL	32837

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11C.95039

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 4000.00

**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 75 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

A. Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95407

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

B. Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City State Zip Code
DETROIT MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95241

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC (ENERGY TRANSFER PAC)

C. Mailing Address 400 W. 15TH ST.
SUITE 720

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00438754

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95251

Amount of Each Receipt this Period
1000.00

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

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

7000.00

**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 76 OF 166	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11C.95066

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK State AR Zip Code 72201

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95230

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11C.95040

Amount of Each Receipt this Period
 2500.00

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

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

8500.00

**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 77 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EVOC REGULATORY SERVICES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1001 FANNIN ST
SUITE 800

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00513671

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11C.95143

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95231

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)

Mailing Address ONE EXPRESS WAY

City ST. LOUIS State MO Zip Code 63121

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11C.94996

Amount of Each Receipt this Period
2500.00

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

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

6000.00

**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 78 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11C.95123

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11C.95065

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95245

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

**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 79 OF 166
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE

Mailing Address 76 SOUTH MAIN STREET

City AKRON State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11C.94982

Amount of Each Receipt this Period
4000.00

B. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)

Mailing Address 6700 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95246

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FREEDOM MATTERS PAC

Mailing Address 8410 HWY 90 A STE 160

City SUGAR LAND State TX Zip Code 77478

FEC ID number of contributing federal political committee. **C** C00491910

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11C.95152

Amount of Each Receipt this Period
2500.00

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

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

7500.00

**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 80 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF SUSAN BROOKS

Mailing Address 9425 N MERIDIAN STREET
237

City State Zip Code
INDIANAPOLIS IN 46260

FEC ID number of contributing federal political committee. **C C00500207**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11C.95136

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95247

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11C.95017

Amount of Each Receipt this Period
2000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 81 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2014

Transaction ID : SA11C.95140

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE-FEDERAL (GEPAC FEDERAL)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00492223**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11C.95130

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GENERAL MILLS INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE GENERAL MILLS BOULEVARD

City State Zip Code
MINNEAPOLIS MN 55426

FEC ID number of contributing federal political committee. **C C00062646**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11C.95122

Amount of Each Receipt this Period
5000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 82 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLOVER PARK GROUP LLC PAC (GLOVER PARK GROUP PAC)

Mailing Address 700 13TH STREET, NW
SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00466094**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11C.95248

Amount of Each Receipt this Period
1000.00

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

Mailing Address 5580 SPRING GROVE DRIVE

City State Zip Code
SOLON OH 44139

FEC ID number of contributing federal political committee. **C C00131557**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SA11C.95240

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address 228 S. WASHINGTON ST., STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00326439**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : SA11C.95010

Amount of Each Receipt this Period
5000.00

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

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

7000.00

**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 83 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) ICE MILLER PAC		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address ONE AMERICAN SQUARE SUITE 2900		Transaction ID : SA11C.95090	
City INDIANAPOLIS	State IN	Zip Code 46282	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00520973			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) JACKSON COUNTY REPUBLICAN PARTY		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address PO BOX 213		Transaction ID : SA11C.95393	
City OAK HILL	State OH	Zip Code 45656	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) JOHN S FUND		Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2014	
Mailing Address PO BOX 853		Transaction ID : SA11C.94973	
City EDWARDSVILLE	State IL	Zip Code 62025	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00390831			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
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: (check only one)	PAGE 84 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95236

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11C.95121

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MARKWEST ENERGY PARTNERS LP POLITICAL ACTION COMMITTEE

Mailing Address 1515 ARAPAHOE STREET
TOWER 1, SUITE 1600

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00489468

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11C.95112

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 85 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : SA11C.94988

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MOLINA HEALTHCARE, INC. PAC

Mailing Address 200 OCEANGATE
SUITE 100

City LONG BEACH State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95184

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95127

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 86 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

Mailing Address 1212 NEW YORK AVE NW
SUITE 1100

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95183

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11C.95051

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11C.94983

Amount of Each Receipt this Period
5000.00

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

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

10500.00

**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 87 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL FEDERATION OF INDEPENDENT BUSINESS/ SAVE AMERICAS FREE ENTERPRISE TRUST

Mailing Address 1201 F ST. NW
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.95131

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL OCEAN INDUSTRIES ASSOCIATION (NOIA) POLITICAL ACTIO

Mailing Address 1120 G STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.95011

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA
1-32-301

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11C.95046

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

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

(check only one)

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

Full Name (Last, First, Middle Initial) A. PATRIOTS IN ACTION		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 1005 CONGRESS AVE STE 910		Transaction ID : SA11C.95182	
City AUSTIN	State TX	Zip Code 78701	
FEC ID number of contributing federal political committee. C C00531590		Amount of Each Receipt this Period 2500.00	
Name of Employer Occupation		Election Cycle-to-Date 2500.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. PG&E CORPORATION EMPLOYEES ENERGYPAC		Date of Receipt M M / D D / Y Y Y Y 07 / 08 / 2014	
Mailing Address 77 BEALE STREET, MAIL CODE: B29H		Transaction ID : SA11C.94972	
City SAN FRANCISCO	State CA	Zip Code 94105	
FEC ID number of contributing federal political committee. C C00177469		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		Election Cycle-to-Date 2000.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. PINNACLE WEST CAPITAL CORPORATION PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 801 PENNSYLVANIA AVE NW SUITE 214		Transaction ID : SA11C.94984	
City WASHINGTON	State DC	Zip Code 20004	
FEC ID number of contributing federal political committee. C C00015933		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		Election Cycle-to-Date 1000.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	4500.00

**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 89 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR		Transaction ID : SA11C.95175
City WASHINGTON	State DC Zip Code 20002	
FEC ID number of contributing federal political committee. C C00343137	Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 815 16TH ST., NW, SUITE 600		Transaction ID : SA11C.95055
City WASHINGTON	State DC Zip Code 20006	
FEC ID number of contributing federal political committee. C C00003160	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 815 16TH ST., NW, SUITE 600		Transaction ID : SA11C.95172
City WASHINGTON	State DC Zip Code 20006	
FEC ID number of contributing federal political committee. C C00003160	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
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: (check only one)	PAGE 90 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City ROSWELL State GA Zip Code 30077

FEC ID number of contributing federal political committee. **C** C00386755

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2003.42

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95234

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K STREET, NW
SUITE 800W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95128

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PRYCE FOR CONGRESS

Mailing Address 250 WEST STREET

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00265850

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11C.95091

Amount of Each Receipt this Period
500.00

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

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

3500.00

**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 91 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
R SCOTT KIRCHBAUM CAMPAIGN ACCOUNT FOR JUDGE OF THE COURT OF COMMON PLEAS

A. Mailing Address 475 GARDENRIDGE CT

City State Zip Code
BOARDMAN OH 44512

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11C.95045

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW
SUITE 320

City State Zip Code
WASHINGTON DC 20007

FEC ID number of contributing federal political committee. C C00165159

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 11000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.95012

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
ROTHFUS FOR CONGRESS

Mailing Address PO BOX 435

City State Zip Code
SEWICKLEY PA 15143

FEC ID number of contributing federal political committee. C C00497115

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95181

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....	2100.00
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: (check only one)	PAGE 92 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
S. C. JOHNSON & SON, INC POLITICAL ACTION COMMITTEE

Mailing Address 1525 HOWE STREET

City RACINE State WI Zip Code 53403

FEC ID number of contributing federal political committee. **C** C00342246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95132

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
SANOFI US SERVICES INC. EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 55 CORPORATE DRIVE

City BRIDGEWATER State NJ Zip Code 08807

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95235

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 RALPH MCGILL BLVD, NE
BIN 10111

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95242

Amount of Each Receipt this Period
 2500.00

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

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

5000.00

**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 93 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SPECTRA ENERGY CORP POLITICAL ACTION COMMITTEE (SPECTRA-DCP PAC)

Mailing Address 5400 WESTHEIMER COURT

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00429662

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11C.95133

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
SUDDENLINK COMMUNICATIONS POLITICAL ACTION COMMITTEE

Mailing Address 520 MARYVILLE CENTRE DRIVE
SUITE 300

City ST. LOUIS State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C** C00426601

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95243

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)

Mailing Address PO BOX 905

City NEWTON State NJ Zip Code 07860

FEC ID number of contributing federal political committee. **C** C00453324

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2998.75

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95179

Amount of Each Receipt this Period
2000.00

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

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

4500.00

**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 94 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC)

Mailing Address 2016 MT. ATHOS ROAD

City LYNCHBURG State VA Zip Code 24504

FEC ID number of contributing federal political committee. **C** C00365502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.95233

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 N.E. ADAMS STREET

City PEORIA State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95191

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THERMO FISHER SCIENTIFIC INC. PAC

Mailing Address 81 WYMAN STREET
PO BOX 9046

City WALTHAM State MA Zip Code 02454

FEC ID number of contributing federal political committee. **C** C00292318

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11C.95170

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 95 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TIMKENSTEEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1835 DUEBER AVENUE SW

City CANTON State OH Zip Code 44706

FEC ID number of contributing federal political committee. **C** C00560946

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11C.95064

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11C.95254

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11C.94977

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

**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 97 OF 166
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WASHINGTON COUNTY REPUBLICAN PARTY

Mailing Address P.O. BOX 353

City State Zip Code
MARIETTA OH 45750

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
65.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 31 2014

Transaction ID : SA11C.95951

Amount of Each Receipt this Period
65.00

IN-KIND: CONTRIBUTION OF OFFICE SPACE 8/24 TO 8/31/2014

B. Full Name (Last, First, Middle Initial)
WASHINGTON COUNTY REPUBLICAN PARTY

Mailing Address P.O. BOX 353

City State Zip Code
MARIETTA OH 45750

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
465.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : SA11C.95953

Amount of Each Receipt this Period
400.00

IN-KIND: CONTRIBUTION OF OFFICE SPACE

C. Full Name (Last, First, Middle Initial)
WELLPOINT, INC. WELLPAC

Mailing Address 120 MONUMENT CIRCLE

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C C00197228**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 29 2014

Transaction ID : SA11C.95255

Amount of Each Receipt this Period
2500.00

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

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

2965.00

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

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

FOR LINE NUMBER: PAGE 98 OF 166
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430
 City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11C.95006

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430
 City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95178

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
WINNOVEMBER POLITICAL ACTION COMMITTEE

Mailing Address 2501 PORTER ST NW #421
 City WASHINGTON State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C** C00516013

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.95177

Amount of Each Receipt this Period
 1000.00

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

3000.00

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

182665.00

**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 99 OF 166
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DRAKES LANDING

Mailing Address 2177 W. WESTERN RESERVE RD

City CANFIELD State OH Zip Code 44406

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
357.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA14.95963

Amount of Each Receipt this Period
 357.12

REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

357.12

357.12

**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 100 OF 166	
	<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)
JOHNSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 655 BEACH STREET		Amount of Each Disbursement this Period _____ 150.00	
City SAN FRANCISCO State CA Zip Code 94109	Purpose of Disbursement FUNDRAISER VENUE COSTS Category/Type 001	Transaction ID : SB17.95209	
Candidate Name AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____			

B. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period _____ 346.20	
City FT WORTH State TX Zip Code 76155	Purpose of Disbursement CAMPAIGN TRAVEL - AIR FARE Category/Type 001	Transaction ID : SB17.95443	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____			

C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period _____ 254.00	
City FT WORTH State TX Zip Code 76155	Purpose of Disbursement CAMPAIGN TRAVEL - AIRFARE Category/Type 002	Transaction ID : SB17.95889	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional).....	_____ 750.00
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)		PAGE 101 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANDY THOMPSON FOR STATE REPRESENTATIVE		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 18508 WOODSFIELD RD		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.95210
City CALDWELL State OH Zip Code 43724	Purpose of Disbursement CAMPAIGN CONTRIBUTIONS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. BOB EVANS		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2014
Mailing Address 3776 SOUTH HIGH ST		Amount of Each Disbursement this Period 65.55 Transaction ID : SB17.95418
City COLUMBUS State OH Zip Code 43207	Purpose of Disbursement CAMPAIGN TRAVEL - MEALS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. CAMBRIDGE PARKS DEPARTMENT		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1101 MCFARLAND DRIVE		Amount of Each Disbursement this Period 205.00 Transaction ID : SB17.95226
City CAMBRIDGE State OH Zip Code 43725	Purpose of Disbursement CAMPAIGN VENUE RENTAL Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	520.55
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)		PAGE 102 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 300 FIRST ST, SE		Amount of Each Disbursement this Period 63.41 Transaction ID : SB17.95438
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN MEALS	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 300 FIRST ST, SE		Amount of Each Disbursement this Period 53.03 Transaction ID : SB17.95793
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN MEALS	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) C. CAROLYN MCFARLAND		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1128 BANTAM RIDGE ROAD		Amount of Each Disbursement this Period 280.00 Transaction ID : SB17.95832
City WINTERSVILLE	State OH	
Zip Code 43953	Purpose of Disbursement CAMPAIGN FUNDRAISER MEALS	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	396.44
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)		PAGE 103 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CIGARS INTERNATIONAL		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 1911 SPILLMAN DRIVE DEPT #26		Amount of Each Disbursement this Period 402.64 Transaction ID : SB17.95769
City BETHLEHEM State PA Zip Code 18015	Purpose of Disbursement CAMPAIGN FUNDRAISER REFRESHMENT COSTS 001 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:		

Full Name (Last, First, Middle Initial) B. COLUMBIANA COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 124 WEST LINCOLN WAY		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.95715
City LISBON State OH Zip Code 44432	Purpose of Disbursement FUNDRAISER MEAL TICKETS 001 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:		

Full Name (Last, First, Middle Initial) C. COMMUNICATIONS COUNSEL, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 37 WEST BROAD STREET, SUITE 325		Amount of Each Disbursement this Period 94200.30 Transaction ID : SB17.95798
City COLUMBUS State OH Zip Code 43215	Purpose of Disbursement CAMPAIGN TV, RADIO & DIGITAL MEDIA BUYS 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	942472.94
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)		PAGE 104 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DISTRICT PROVISIONS		Date of Disbursement
Mailing Address 550 PENN ST. NE		M M / D D / Y Y Y Y 07 / 24 / 2014
City	State	Zip Code
WASHINGTON	DC	20002
Purpose of Disbursement CAMPAIGN FUNDRAISER MEALS	Category/ Type 001	Amount of Each Disbursement this Period
Candidate Name		3329.33
Office Sought:	Disbursement For:	Transaction ID : SB17.95449
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DISTRICT PROVISIONS		Date of Disbursement
Mailing Address 550 PENN ST. NE		M M / D D / Y Y Y Y 09 / 24 / 2014
City	State	Zip Code
WASHINGTON	DC	20002
Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD & REFRESHMENTS	Category/ Type 003	Amount of Each Disbursement this Period
Candidate Name		1882.56
Office Sought:	Disbursement For:	Transaction ID : SB17.95918
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELECTEKUSA		Date of Disbursement
Mailing Address P.O. BOX 23715		M M / D D / Y Y Y Y 08 / 06 / 2014
City	State	Zip Code
CHAGRIN FALLS	OH	44023
Purpose of Disbursement CAMPAIGN SOFTWARE FEES	Category/ Type 001	Amount of Each Disbursement this Period
Candidate Name		1600.00
Office Sought:	Disbursement For:	Transaction ID : SB17.95731
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6811.89
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)		PAGE 105 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address P.O. BOX 23715		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.95825
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement CAMPAIGN SOFTWARE SERVICE	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. ENTERPRISE RENT-A-CAR CO. OF KENTUCKY		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 832 PIKE ST		Amount of Each Disbursement this Period 97.86 Transaction ID : SB17.95870
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - CAR RENTAL	Category/ Type 002
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:	

Full Name (Last, First, Middle Initial) C. EPIPHANY PRODUCTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 104 HUME AVENUE		Amount of Each Disbursement this Period 5031.17 Transaction ID : SB17.95195
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement FUNDRAISER RETAINER & COSTS	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	5929.03
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)		PAGE 106 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EPIPHANY PRODUCTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 104 HUME AVENUE		Amount of Each Disbursement this Period 5060.96
City ALEXANDRIA State VA Zip Code 22301	Purpose of Disbursement FUNDRAISER RETAINER AND COSTS Category/Type 003	
Candidate Name		Transaction ID : SB17.95729
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:		

Full Name (Last, First, Middle Initial) B. EPIPHANY PRODUCTIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 104 HUME AVENUE		Amount of Each Disbursement this Period 5015.17
City ALEXANDRIA State VA Zip Code 22301	Purpose of Disbursement CAMPAIGN FUNDRAISER RETAINER Category/Type 003	
Candidate Name		Transaction ID : SB17.95819
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:		

Full Name (Last, First, Middle Initial) C. EXPEDIA		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 333 108TH AVENUE NE		Amount of Each Disbursement this Period 7.00
City BELLEVUE State WA Zip Code 98004	Purpose of Disbursement ONLINE TRAVEL RESERVATION FEE Category/Type 001	
Candidate Name		Transaction ID : SB17.95758
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:		

SUBTOTAL of Disbursements This Page (optional).....	10083.13
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)		PAGE 107 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX KINKO'S		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1601 CRYSTAL SQUARE		Amount of Each Disbursement this Period 326.35 Transaction ID : SB17.95750
City ARLINGTON State VA Zip Code 22202	Purpose of Disbursement CAMPAIGN PRINTED MATERIAL Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. AMANDA FINN		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 797.95 Transaction ID : SB17.95197
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE & TRAVEL REIMBURSEMENT Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2014
Mailing Address 208 S AKARD		Amount of Each Disbursement this Period 60.98 Transaction ID : SB17.95208 [MEMO ITEM]
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CAMPAIGN CELL PHONE USAGE Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1124.30
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)		PAGE 108 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMANDA FINN		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 547.63 Transaction ID : SB17.95211
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL EXPENSE REIMBURSEMENT	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 17.09 Transaction ID : SB17.95215 [MEMO ITEM]
City ATLANTA	State GA	
Zip Code 30328	Purpose of Disbursement CAMPAIGN COPYING COSTS	Category/ Type 002
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:	

Full Name (Last, First, Middle Initial) C. AMANDA FINN		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 830.43 Transaction ID : SB17.95820
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL REIMBURSEMENT	Category/ Type 002
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:	

SUBTOTAL of Disbursements This Page (optional).....	1378.06
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)		PAGE 109 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM / DD / YYYY 08 / 31 / 2014
Mailing Address 208 S AKARD		Amount of Each Disbursement this Period 60.98
City DALLAS	State TX Zip Code 75202	
Purpose of Disbursement PHONE REIMBURSEMENT	Category/Type 001	Transaction ID : SB17.95821 [MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) B. HYATT HOTELS		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 71 SOUTH WACKER DRIVE 12TH FLOOR		Amount of Each Disbursement this Period 20.00
City CHICAGO	State IL Zip Code 60606	
Purpose of Disbursement PARKING FEE	Category/Type 002	Transaction ID : SB17.95822 [MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) C. AMANDA FINN		Date of Disbursement MM / DD / YYYY 09 / 11 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 574.80
City MARIETTA	State OH Zip Code 45750	
Purpose of Disbursement CAMPAIGN TRAVEL - CAR RENTAL	Category/Type 002	Transaction ID : SB17.95838
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:		

SUBTOTAL of Disbursements This Page (optional).....	574.80
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)		PAGE 110 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DOLLAR RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address P.O. BOX 33167		Amount of Each Disbursement this Period 574.80
City TULSA	State OK	
Zip Code 74153	Purpose of Disbursement CAMPAIGN TRAVEL - CAR RENTAL	Transaction ID : SB17.95839
Candidate Name	002 Category/ Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FOUNTAIN SQUARE GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 632 VINE STREET SUITE 805		Amount of Each Disbursement this Period 2507.50
City CINCINNATI	State OH	
Zip Code 45202	Purpose of Disbursement FUNDRAISING SERVICES	Transaction ID : SB17.95192
Candidate Name	001 Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C. GIANT EAGLE #6510		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 128 GROSS ST		Amount of Each Disbursement this Period 17.94
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN REFRESHMENTS FOR VOLUNTEERS	Transaction ID : SB17.95801
Candidate Name	001 Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2525.44
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)		PAGE 111 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GIANT EAGLE #6510		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 128 GROSS ST		Amount of Each Disbursement this Period 12.62
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement REFRESHMENTS FOR CAMPAIGN VOLUNTEERS 001 Category/Type	
Candidate Name		Transaction ID : SB17.95902
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:	

Full Name (Last, First, Middle Initial) B. TY GRIFFIN		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1415 BENDER RD		Amount of Each Disbursement this Period 966.35
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE REIMBURSEMENT 001 Category/Type	
Candidate Name		Transaction ID : SB17.95737
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:	

Full Name (Last, First, Middle Initial) C. TY GRIFFIN		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1415 BENDER RD		Amount of Each Disbursement this Period 460.16
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - MILEAGE REIMBURSEMENT 002 Category/Type	
Candidate Name		Transaction ID : SB17.95836
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:	

SUBTOTAL of Disbursements This Page (optional).....	1439.16
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)		PAGE 112 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HILL COUNTRY BARBEQUE		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 410 7TH STREET		Amount of Each Disbursement this Period 989.52 Transaction ID : SB17.95910
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD & REFRESHMENTS Category/Type 003	
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:		

Full Name (Last, First, Middle Initial) B. HILTON AMERICAS - HOUSTON		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1600 LAMAR		Amount of Each Disbursement this Period 18.16 Transaction ID : SB17.95872
City HOUSTON State TX Zip Code 77010	Purpose of Disbursement CAMPAIGN TRAVEL - MEALS Category/Type 002	
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:		

Full Name (Last, First, Middle Initial) C. HILTON AMERICAS - HOUSTON		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1600 LAMAR		Amount of Each Disbursement this Period 150.93 Transaction ID : SB17.95873
City HOUSTON State TX Zip Code 77010	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1158.61
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)		PAGE 113 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HILTON AMERICAS - HOUSTON			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 1600 LAMAR			Amount of Each Disbursement this Period 730.13	
City HOUSTON	State TX	Zip Code 77010	Transaction ID : SB17.95885	
Purpose of Disbursement CAMPAIGN TRAVEL - LODGING		002		
Candidate Name			Category/ Type	
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:			

Full Name (Last, First, Middle Initial) B. HILTON AMERICAS - HOUSTON			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 1600 LAMAR			Amount of Each Disbursement this Period 8.34	
City HOUSTON	State TX	Zip Code 77010	Transaction ID : SB17.95886	
Purpose of Disbursement CAMPAIGN TRAVEL - MEALS		002		
Candidate Name			Category/ Type	
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:			

Full Name (Last, First, Middle Initial) C. HOLIDAY INN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014	
Mailing Address 5555 CERNI PLACE			Amount of Each Disbursement this Period 183.99	
City AUSTINTOWN	State OH	Zip Code 44515	Transaction ID : SB17.95452	
Purpose of Disbursement CAMPAIGN TRAVEL - LODGING		001		
Candidate Name			Category/ Type	
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:			

SUBTOTAL of Disbursements This Page (optional).....	922.46
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)		PAGE 114 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOLIDAY INN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 5555 CERNI PLACE		Amount of Each Disbursement this Period 999,999,999.99 183.99
City AUSTINTOWN State OH Zip Code 44515	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING	
Candidate Name	Category/Type 001	Transaction ID : SB17.95453
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:	

Full Name (Last, First, Middle Initial) B. HYDE BROTHERS PRINTING CO.		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 999,999,999.99 654.76
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN PRINTING - LETTERHEAD AND ENVELOPES	
Candidate Name	Category/Type 001	Transaction ID : SB17.95444
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:	

Full Name (Last, First, Middle Initial) C. HYDE BROTHERS PRINTING CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 999,999,999.99 156.16
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN PRINTING	
Candidate Name	Category/Type 001	Transaction ID : SB17.95864
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:	

SUBTOTAL of Disbursements This Page (optional).....	994.91
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)		PAGE 115 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HYDE BROTHERS PRINTING CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 188.60
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN PRINTING 001 Category/Type	
Candidate Name		Transaction ID : SB17.95865
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. HYDE BROTHERS PRINTING CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 206.19
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN PRINTING 001 Category/Type	
Candidate Name		Transaction ID : SB17.95866
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JASON'S DELI		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 901 MCKINNEY ST		Amount of Each Disbursement this Period 257.08
City HOUSTON State TX Zip Code 77002	Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD 003 Category/Type	
Candidate Name		Transaction ID : SB17.95882
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)..... 651.87
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)		PAGE 116 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BILL JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 519 FIFTH STREET		Amount of Each Disbursement this Period 582.74 Transaction ID : SB17.95217
City State Zip Code MARIETTA OH 45750	Purpose of Disbursement CAMPAIGN TRAVEL EXPENSE REIMBURSEMENT Category/Type 001	
Candidate Name BILL JOHNSON	Office Sought: <input checked="" 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: OH District: 06		

Full Name (Last, First, Middle Initial) B. NEMACOLIN WOODLANDS RESORT		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1001 LAFAYETTE DR		Amount of Each Disbursement this Period 242.53 Transaction ID : SB17.95218 [MEMO ITEM]
City State Zip Code FARMINGTON PA 15437	Purpose of Disbursement NRCC SUMMER MEETING Category/Type 002	
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:		

Full Name (Last, First, Middle Initial) C. CONOCOPHILLIPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2014
Mailing Address WOOD COUNTY AIRPORT		Amount of Each Disbursement this Period 196.80 Transaction ID : SB17.95220 [MEMO ITEM]
City State Zip Code WILLIAMSTOWN WV 26187	Purpose of Disbursement CAMPAIGN TRAVEL - FUEL COSTS Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	582.74
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)	PAGE 117 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BILL JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 519 FIFTH STREET		Amount of Each Disbursement this Period 194.80 Transaction ID : SB17.95840
City MARIETTA	State OH	
Purpose of Disbursement CAMPAIGN TRAVEL REIMBURSEMENT		Category/ Type 002
Candidate Name BILL JOHNSON		
Office Sought: <input checked="" 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: OH	District: 06	

Full Name (Last, First, Middle Initial) B. CONOCOPHILLIPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address WOOD COUNTY AIRPORT		Amount of Each Disbursement this Period 184.80 Transaction ID : SB17.95841 [MEMO ITEM]
City WILLIAMSTOWN	State WV	
Purpose of Disbursement CAMPAIGN TRAVEL - FUEL COSTS		Category/ Type 002
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:	

Full Name (Last, First, Middle Initial) C. SARAH KEELER		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 72 GERTRUDE AVE.		Amount of Each Disbursement this Period 811.41 Transaction ID : SB17.95733
City BOARDMAN	State OH	
Purpose of Disbursement CAMPAIGN MILEAGE REIMBURSEMENT		Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	1006.21
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)		PAGE 118 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SARAH KEELER		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 72 GERTRUDE AVE.		Amount of Each Disbursement this Period 1047.84 Transaction ID : SB17.95833
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN TRAVEL - MILEAGE REIMBURSEMENT Category/Type 002	
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:		

Full Name (Last, First, Middle Initial) B. LAFAYETT RESTAURANT & LOUNGE		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 101 FRONT STREET		Amount of Each Disbursement this Period 335.21 Transaction ID : SB17.95778
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - MEALS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. LAFAYETTE HOTEL		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 101 FRONT STREET		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.95773
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	1733.05
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)		PAGE 119 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAIL POUCH, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 871 CANTERBURY RD SUITE A		Amount of Each Disbursement this Period 2149.88
City WESTLAKE State OH Zip Code 44145	Purpose of Disbursement FUNDRAISING MAILER Category/Type 004	
Purpose of Disbursement FUNDRAISING MAILER		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:		Transaction ID : SB17.95736

Full Name (Last, First, Middle Initial) B. MARATHON - CAMBRIDGE		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address 2245 SOUTHGATE PARK RD		Amount of Each Disbursement this Period 67.82
City CAMBRIDGE State OH Zip Code 43725	Purpose of Disbursement CAMPAIGN TRAVEL - FUEL COSTS Category/Type 001	
Purpose of Disbursement CAMPAIGN TRAVEL - FUEL COSTS		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:		Transaction ID : SB17.95746

Full Name (Last, First, Middle Initial) C. MARIETTA OFFICE SUPPLY		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 63.25
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Category/Type 001	
Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES		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:		Transaction ID : SB17.95424

SUBTOTAL of Disbursements This Page (optional).....	2280.95
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)		PAGE 120 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARIETTA OFFICE SUPPLY		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 44.90 Transaction ID : SB17.95436
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. MARIETTA OFFICE SUPPLY		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 36.75 Transaction ID : SB17.95790
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. MARIETTA OFFICE SUPPLY		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 39.67 Transaction ID : SB17.95919
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	121.32
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)		PAGE 121 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARIETTA OFFICE SUPPLY			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address 223 SECOND ST			Amount of Each Disbursement this Period 41.59	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95921	
Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) B. MITCHELL'S STEAKHOUSE			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 45 NORTH THIRD STREET			Amount of Each Disbursement this Period 220.29	
City COLUMBUS	State OH	Zip Code 43215	Transaction ID : SB17.95780	
Purpose of Disbursement CAMPAIGN FUNDRAISER MEALS		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) C. MAJIDA MOURAD			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2014	
Mailing Address 1455 PENNSYLVANIA AVE. NW			Amount of Each Disbursement this Period 211.80	
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SB17.95844	
Purpose of Disbursement CAMPAIGN FUNDRAISER REFRESHMENTS		Category/ Type 001		
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:				

SUBTOTAL of Disbursements This Page (optional).....	473.68
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)		PAGE 122 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SPEC'S WINE SPIRITS & FINER FOODS			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 2410 SMITH STREET			Amount of Each Disbursement this Period 211.80	
City HOUSTON	State TX	Zip Code 77006	Transaction ID : SB17.95845	
Purpose of Disbursement FUNDRAISER REFRESHMENTS		Category/ Type 003	[MEMO ITEM]	
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:				

Full Name (Last, First, Middle Initial) B. OHIO FALLEN HEROES MEMORIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 7516 COUNTRY ROAD 19			Amount of Each Disbursement this Period 250.00	
City MT. VERNON	State OH	Zip Code 43050	Transaction ID : SB17.95728	
Purpose of Disbursement CONTRIBUTION		Category/ Type 004		
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:				

Full Name (Last, First, Middle Initial) C. PATRIOT SIGNAGE INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 1001 SECOND AVENUE DAYTON			Amount of Each Disbursement this Period 11655.61	
City DAYTON	State KY	Zip Code 41074	Transaction ID : SB17.95763	
Purpose of Disbursement CAMPAIGN YARD SIGNS		Category/ Type 001		
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:				

SUBTOTAL of Disbursements This Page (optional).....	11905.61
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)		PAGE 123 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PATRIOT SIGNAGE INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 1001 SECOND AVENUE DAYTON		Amount of Each Disbursement this Period 42.70 Transaction ID : SB17.95795
City DAYTON State KY Zip Code 41074	Purpose of Disbursement CAMPAIGN YARD SIGNS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 4948.55 Transaction ID : SB17.95704
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF SALARIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2194.77 Transaction ID : SB17.95705
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	7186.02
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)		PAGE 124 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 998.46 Transaction ID : SB17.95706
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN PAYROLL PROCESSING FEE Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 674.95 Transaction ID : SB17.95707
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 278.30 Transaction ID : SB17.95708
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	998.46
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)		PAGE 125 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 5704.48
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL	
Candidate Name		Transaction ID : SB17.95709
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2518.21
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN PAYROLL TAXES	
Candidate Name		Transaction ID : SB17.95710
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN PAYROLL PROCESSING FEE	
Candidate Name		Transaction ID : SB17.95711
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:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	8267.90
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)		PAGE 126 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. PAYCHEX

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement
CAMPAIGN STAFF PAYROLL EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 14 / 2014

Amount of Each Disbursement this Period: 5704.48

Transaction ID : SB17.95716

Category/Type: 001

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

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement
CAMPAIGN STAFF PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 2518.21

Transaction ID : SB17.95717

Category/Type: 001

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

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement
CAMPAIGN PAYROLL PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 45.21

Transaction ID : SB17.95718

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 8267.90

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)		PAGE 127 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 5704.49 Transaction ID : SB17.95719
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2507.70 Transaction ID : SB17.95720
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21 Transaction ID : SB17.95721
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL PROCESSING FEE Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	8257.40
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)		PAGE 128 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 5704.50 Transaction ID : SB17.95813
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL EXPENSE 001 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:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2427.56 Transaction ID : SB17.95814
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES 001 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:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21 Transaction ID : SB17.95815
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN PAYROLL PROCESSING FEE 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	8177.27
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)		PAGE 129 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 5704.48 Transaction ID : SB17.95816
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL EXPENSE Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2417.58 Transaction ID : SB17.95817
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21 Transaction ID : SB17.95818
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN PAYROLL PROCESSING FEE Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	8167.21
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)		PAGE 130 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95696
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 Transaction ID : SB17.95697
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 0.90 Transaction ID : SB17.95698
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	32.40
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)	PAGE 131 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95699
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.95700
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 18.60 Transaction ID : SB17.95701
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	54.60
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)		PAGE 132 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 Transaction ID : SB17.95702
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 Transaction ID : SB17.95703
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 4.50 Transaction ID : SB17.95722
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	7.50
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)	PAGE 133 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 78.00 Transaction ID : SB17.95723
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.95725
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 12.00 Transaction ID : SB17.95724
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	78.00
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)	PAGE 134 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95726
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 Transaction ID : SB17.95727
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95849
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	61.50
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)		PAGE 135 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 12.00 Transaction ID : SB17.95850
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95851
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.95852
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	258.00
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)	PAGE 136 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 23.10 Transaction ID : SB17.95853
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.95854
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 246.00 Transaction ID : SB17.95855
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	284.10
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)	PAGE 137 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.95856
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.95857
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEE	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 157.50 Transaction ID : SB17.95858
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	247.50
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)	PAGE 138 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.95859
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.95860
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
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:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 36.00 Transaction ID : SB17.95861
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	186.00
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)		PAGE 139 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PLUMBERS & PIPEFITTERS LOCAL 396		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 493 BEV RD. BLDG 3		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.95714
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement GOLF OUTING HOLE SPONSORSHIP Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. PROMOS UNLIMITED		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 408 EAST STATE STREET		Amount of Each Disbursement this Period 165.00 Transaction ID : SB17.95794
City SALEM State OH Zip Code 44460	Purpose of Disbursement CAMPAIGN STICKERS Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. QUAKER STEAK & LUBE		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2014
Mailing Address 5800 INTERSTATE BLVD.		Amount of Each Disbursement this Period 144.57 Transaction ID : SB17.95416
City AUSTINTOWN State OH Zip Code 44515	Purpose of Disbursement CAMPAIGN MEAL AFTER PARADE WALKS Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	559.57
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)		PAGE 140 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED ROOF INN		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 111 EAST NATIONWIDE BLVD		Amount of Each Disbursement this Period 96.20 Transaction ID : SB17.95799
City COLUMBUS State OH Zip Code 43215	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. S.T.A.R.T., LLC		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 797 COOL SPRINGS ROAD		Amount of Each Disbursement this Period 572.00 Transaction ID : SB17.95782
City MINGO JUNCTION State OH Zip Code 43938	Purpose of Disbursement CAMPAIGN FUNDRAISER SUPPLIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. SAM'S CLUB		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 6361 SOUTH AVENUE		Amount of Each Disbursement this Period 29.23 Transaction ID : SB17.95748
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN PARADE CANDY Category/Type 007	
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:		

SUBTOTAL of Disbursements This Page (optional).....	697.43
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)	PAGE 141 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAM'S CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 6361 SOUTH AVENUE		Amount of Each Disbursement this Period 33.72 Transaction ID : SB17.95767
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN PARADE CANDY Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. SAM'S CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 6361 SOUTH AVENUE		Amount of Each Disbursement this Period 40.28 Transaction ID : SB17.95792
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN PARADE CANDY Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. SAM'S CLUB		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 6361 SOUTH AVENUE		Amount of Each Disbursement this Period 64.58 Transaction ID : SB17.95914
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN PARADE CANDY Candidate Name Category/Type 007	
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:	

SUBTOTAL of Disbursements This Page (optional).....	138.58
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)		PAGE 142 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAM'S CLUB		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 6361 SOUTH AVENUE		Amount of Each Disbursement this Period 79.01
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement FOOD & REFRESHMENTS FOR CAMPAIGN RALLY	
Candidate Name	Category/Type 007	Transaction ID : SB17.95923
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:	

Full Name (Last, First, Middle Initial) B. ALEX SCHARFETTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 109 SCAMMEL ST. APT A		Amount of Each Disbursement this Period 839.08
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE REIMBURSEMENT	
Candidate Name	Category/Type 001	Transaction ID : SB17.95196
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:	

Full Name (Last, First, Middle Initial) C. ALEX SCHARFETTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 109 SCAMMEL ST. APT A		Amount of Each Disbursement this Period 1118.48
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE REIMBURSEMENT	
Candidate Name	Category/Type 001	Transaction ID : SB17.95732
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:	

SUBTOTAL of Disbursements This Page (optional).....	2036.57
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)		PAGE 143 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALEX SCHARFETTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 109 SCAMMEL ST. APT A		Amount of Each Disbursement this Period 2366.88 Transaction ID : SB17.95826
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - MILEAGE REIMBURSEMENT Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. ALEX SCHARFETTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 109 SCAMMEL ST. APT A		Amount of Each Disbursement this Period 527.46 Transaction ID : SB17.95834
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - VEHICLE REPAIRS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. MAHONE TIRE SERVICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 155 FRONT STREET		Amount of Each Disbursement this Period 527.45 Transaction ID : SB17.95835 [MEMO ITEM]
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - VEHICLE REPAIRS Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2894.34
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)	PAGE 144 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SECOND FREEDOM, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address PO BOX 5306		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.95730
City POLAND State OH Zip Code 44514	Purpose of Disbursement ACCOUNTING/COMPLIANCE EXPENSE 001 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:		

Full Name (Last, First, Middle Initial) B. SECOND FREEDOM, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO BOX 5306		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.95831
City POLAND State OH Zip Code 44514	Purpose of Disbursement CAMPAIGN COMPLIANCE AND ACCOUNTING 001 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:		

Full Name (Last, First, Middle Initial) C. SONOMA RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 233 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 169.70 Transaction ID : SB17.95432
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	1669.70
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)	PAGE 145 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SONOMA RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 233 PENNSYLVANIA AVE			Amount of Each Disbursement this Period 124.50 Transaction ID : SB17.95456
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD COSTS		Category/ Type 001	
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:		

Full Name (Last, First, Middle Initial) B. SONOMA RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 233 PENNSYLVANIA AVE			Amount of Each Disbursement this Period 1556.10 Transaction ID : SB17.95897
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD COSTS		Category/ Type 003	
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:		

Full Name (Last, First, Middle Initial) C. SPREAD EAGLE TAVERN			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 10150 PLYMOUTH STREET			Amount of Each Disbursement this Period 1707.95 Transaction ID : SB17.95827
City HANOVERTON	State OH	Zip Code 44423	
Purpose of Disbursement FUNDRAISER VENUE AND MEALS		Category/ Type 003	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3388.55
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)		PAGE 146 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES INC.		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 1260 DORAL DR		Amount of Each Disbursement this Period 45.47 Transaction ID : SB17.95427
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. STAPLES INC.		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 1260 DORAL DR		Amount of Each Disbursement this Period 6.38 Transaction ID : SB17.95749
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. SUPPORTERS AND FRIENDS OF RON FERGUSON		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 299 ORLANDO MANOR		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.95830
City WINTERSVILLE State OH Zip Code 43953	Purpose of Disbursement CAMPAIGN CONTRIBUTION Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	301.85
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)		PAGE 147 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TALAY THAI		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 406 FIRST STREET		Amount of Each Disbursement this Period 98.12 Transaction ID : SB17.95425
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN TRAVEL - MEALS	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. TAYLOR GOURMET		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 485 K STREET NW		Amount of Each Disbursement this Period 370.36 Transaction ID : SB17.95420
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement CAMPAIGN FUNDRAISER FOOD COSTS	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) C. TRACTOR SUPPLY CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 315 GROSS AVENUE		Amount of Each Disbursement this Period 349.30 Transaction ID : SB17.95881
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement GRASSROOTS MARKETING - YARD SIGN SUPPLIES	Category/ Type 004
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:	

SUBTOTAL of Disbursements This Page (optional).....	817.78
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)		PAGE 148 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRACTOR SUPPLY CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 315 GROSS AVENUE		Amount of Each Disbursement this Period 10.70
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MARKETING - YARD SIGN SUPPLIES	
Candidate Name	Category/Type 001	Transaction ID : SB17.95892
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:	

Full Name (Last, First, Middle Initial) B. TRACTOR SUPPLY CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 315 GROSS AVENUE		Amount of Each Disbursement this Period 85.59
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MARKETING - SUPPLIES OF LARGE YARD ISGNS	
Candidate Name	Category/Type 001	Transaction ID : SB17.95905
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:	

Full Name (Last, First, Middle Initial) C. TRACTOR SUPPLY CO.		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 315 GROSS AVENUE		Amount of Each Disbursement this Period 42.79
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN SUPPLIES FOR LARGE YARD SIGNS	
Candidate Name	Category/Type 004	Transaction ID : SB17.95920
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:	

SUBTOTAL of Disbursements This Page (optional).....	139.08
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)		PAGE 149 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U S POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 407 BOARDMAN CANFIELD RD		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.95765
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement CAMPAIGN POSTAGE STAMPS 001 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:		

Full Name (Last, First, Middle Initial) B. U S POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 99 S WALNUT ST		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.95756
City YOUNGSTOWN State OH Zip Code 44501	Purpose of Disbursement CAMPAIGN POSTAGE STAMPS 001 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:		

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 233 SOUTH WACKER DRIVE		Amount of Each Disbursement this Period 519.10 Transaction ID : SB17.95448
City CHICAGO State IL Zip Code 60606	Purpose of Disbursement CAMPAIGN TRAVEL - AIRFARE 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	1009.10
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)	PAGE 150 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 233 SOUTH WACKER DRIVE			Amount of Each Disbursement this Period 913.40	
City CHICAGO	State IL	Zip Code 60606	Transaction ID : SB17.95755	
Purpose of Disbursement CAMPAIGN TRAVEL - AIRFARE		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 233 SOUTH WACKER DRIVE			Amount of Each Disbursement this Period 339.70	
City CHICAGO	State IL	Zip Code 60606	Transaction ID : SB17.95759	
Purpose of Disbursement CAMPAIGN TRAVEL - AIRFARE		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 233 SOUTH WACKER DRIVE			Amount of Each Disbursement this Period 25.00	
City CHICAGO	State IL	Zip Code 60606	Transaction ID : SB17.95868	
Purpose of Disbursement CAMPAIGN TRAVEL - AIRLINE FEES		Category/ Type 002		
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:				

SUBTOTAL of Disbursements This Page (optional).....	913.40
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)		PAGE 151 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 233 SOUTH WACKER DRIVE		Amount of Each Disbursement this Period 8.99 Transaction ID : SB17.95876
City CHICAGO State IL Zip Code 60606	Purpose of Disbursement CAMPAIGN TRAVEL - MEALS Candidate Name Category/Type 002	
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:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 233 SOUTH WACKER DRIVE		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.95888
City CHICAGO State IL Zip Code 60606	Purpose of Disbursement CAMPAIGN TRAVEL - AIRLINE FEES Candidate Name Category/Type 002	
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:	

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 57.70 Transaction ID : SB17.95431
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN POSTAGE Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	91.69
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)		PAGE 152 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 222.73 Transaction ID : SB17.95433
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN FUNDRAISER COPIER COSTS 001 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:		

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 107.36 Transaction ID : SB17.95446
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN COPY COSTS 001 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:		

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 34.76 Transaction ID : SB17.95447
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN COPY EXPENSE 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	364.85
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)	PAGE 153 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 237.46 Transaction ID : SB17.95752
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN COLOR COPIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 216.76 Transaction ID : SB17.95754
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN MATERIALS - COLOR COPIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 223.94 Transaction ID : SB17.95761
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN MATERIALS - COLOR COPIES Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	678.16
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)	PAGE 154 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 42.90 Transaction ID : SB17.95762
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN MATERIALS - COLOR COPIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 15.23 Transaction ID : SB17.95770
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN MATERIALS COLOR COPIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 16.47 Transaction ID : SB17.95789
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN COLOR COPIES FOR FUNDRAISER 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	74.60
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)	PAGE 155 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 41.27 Transaction ID : SB17.95791
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN FUNDRAISER COLOR COPIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 58.03 Transaction ID : SB17.95867
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN PRINTING - COLOR COPIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 14.75 Transaction ID : SB17.95887
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN PRINTING - COLOR COPIES Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	114.05
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)		PAGE 156 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 100.60 Transaction ID : SB17.95890
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN PRINTING - COPIES 001 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:		

Full Name (Last, First, Middle Initial) B. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 25.29 Transaction ID : SB17.95893
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN FUNDRAISER - INVITATION COPIES 003 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:		

Full Name (Last, First, Middle Initial) C. UNITED PARCEL SERVICE, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 60.06 Transaction ID : SB17.95906
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement COPIES FOR CAMPAIGN FUNDRAISER 003 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:		

SUBTOTAL of Disbursements This Page (optional).....	185.95
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)	PAGE 157 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED PARCEL SERVICE, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address 55 GLENLAKE PARKWAY NE			Amount of Each Disbursement this Period 42.86	
City ATLANTA	State GA	Zip Code 30328	Transaction ID : SB17.95922	
Purpose of Disbursement CAMPAIGN COPIES		001 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:				

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE - MARIETTA			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014	
Mailing Address 100 POST ST			Amount of Each Disbursement this Period 490.00	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95423	
Purpose of Disbursement CAMPAIGN POSTAGE FOR FUNDRAISER		001 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:				

Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE - MARIETTA			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 100 POST ST			Amount of Each Disbursement this Period 343.00	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95445	
Purpose of Disbursement CAMPAIGN POSTAGE		001 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:				

SUBTOTAL of Disbursements This Page (optional).....	875.86
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)	PAGE 158 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE - MARIETTA		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.95764
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE STAMPS Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE - MARIETTA		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.95768
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE STAMPS Candidate Name Category/Type 001	
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:	

Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE - MARIETTA		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 5.34 Transaction ID : SB17.95796
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	495.34
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)		PAGE 159 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE - MARIETTA			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 100 POST ST			Amount of Each Disbursement this Period 999,999.99 196.00	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95863	
Purpose of Disbursement CAMPAIGN POSTAGE STAMPS		Category/ Type 001		
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: _____			

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE - MARIETTA			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 100 POST ST			Amount of Each Disbursement this Period 999,999.99 392.00	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95891	
Purpose of Disbursement CAMPAIGN POSTAGE STAMPS		Category/ Type 001		
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: _____			

Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE - MARIETTA			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 100 POST ST			Amount of Each Disbursement this Period 999,999.99 5.75	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.95896	
Purpose of Disbursement CAMPAIGN POSTAGE		Category/ Type 001		
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: _____			

SUBTOTAL of Disbursements This Page (optional).....	999,999.99 593.75
TOTAL This Period (last page this line number only).....	999,999.99

**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 160 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED STATES POSTAL SERVICE - MARIETTA		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 54.75 Transaction ID : SB17.95907
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE 001 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:		

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE - MARIETTA		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.95909
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE 001 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:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 338.20 Transaction ID : SB17.95786
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement CAMPAIGN TRAVEL - AIRFARE 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	398.70
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)		PAGE 161 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 7.34 Transaction ID : SB17.95440
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 17.18 Transaction ID : SB17.95454
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 15.31 Transaction ID : SB17.95455
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	39.83
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)	PAGE 162 OF 166			
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 49.34 Transaction ID : SB17.95460
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES 001 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:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 14.89 Transaction ID : SB17.95751
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES 001 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:		

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 14.89 Transaction ID : SB17.95753
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	79.12
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)		PAGE 163 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 24.43 Transaction ID : SB17.95766
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN PARADE CANDY Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 13.46 Transaction ID : SB17.95777
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement CAMPAIGN MEALS - REFRESHMENTS FOR VOLUNTEERS Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. WASHINGTON COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 353		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.95954
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement IN-KIND: CONTRIBUTION OF OFFICE SPACE 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:		

SUBTOTAL of Disbursements This Page (optional).....	437.89
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)		PAGE 164 OF 166	
	<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)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WESTIN NATIONAL HARBOR		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 171 WATERFRONT STREET		Amount of Each Disbursement this Period 666.03 Transaction ID : SB17.95439
City NATIONAL HARBOR	State MD	
Zip Code 20745	Purpose of Disbursement CAMPAIGN TRAVEL - HOTEL LODGING	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) B. YOLAN DENNIS FOR OHIO COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 500 WYNNCREST DRIVE		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.95738
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN CONTRIBUTION	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
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:	

SUBTOTAL of Disbursements This Page (optional).....	916.03
TOTAL This Period (last page this line number only).....	1066280.91

**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 165 OF 166	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EDWARD KENNETH RICE			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address 2077 LINDA FLORA DRIVE			Amount of Each Disbursement this Period 300.00	
City LOS ANGELES	State CA	Zip Code 90077	Transaction ID : SB20A.95713	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. A. B. SIEMER			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address 2 BOTTOMLEY CRESCENT CT			Amount of Each Disbursement this Period 2500.00	
City GAHANNA	State OH	Zip Code 43054	Transaction ID : SB20A.95712	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
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:				

SUBTOTAL of Disbursements This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	2800.00

**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 166 OF 166	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOHNSON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REPUBLICAN MAINSTREET PARTNERSHIP PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address C/O G&W 2201 WISCONSIN AVE., NW SUITE 320		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB20C.95964
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement REFUND OF EXCESSIVE CONTRIBUTION RECEIVED ON 8/4/14 Category/Type 010	
Candidate Name REPUBLICAN MAINSTREET PARTNERSHIP PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
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:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00