

# 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.   
**BJORN FOR CONGRESS**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)  
    
CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼   
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  07 / 01 / 2016 through  09 / 30 / 2016

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 MCLEAN, SUSAN, MARIE, MRS,

Signature of Treasurer MCLEAN, SUSAN, MARIE, MRS, *[Electronically Filed]* Date  10 / 14 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**BJORN 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))....	27364.83	49457.62
(b) Total Contribution Refunds (from Line 20(d)) .....	40.00	40.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27324.83	49417.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	25554.41	47432.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25554.41	47432.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2030.15	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	8000.00	

**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 05/2016)

Write or Type Committee Name

**BJORN FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6293.00	16755.91
(ii) Unitemized.....	13449.01	21824.61
(iii) TOTAL of contributions from individuals ▶	19742.01	38580.52
(b) Political Party Committees.....	3500.00	5000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	4122.82	5877.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	27364.83	49457.62
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	100.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	27364.83	49557.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25554.41	47432.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	40.00	40.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	40.00	40.00
21. OTHER DISBURSEMENTS .....	0.00	55.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	25594.41	47527.47

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	259.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	27364.83
25. SUBTOTAL (add Line 23 and Line 24).....	27624.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25594.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2030.15

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

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

FOR LINE NUMBER: PAGE 5 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BARR, CARITA, S, ,**

Mailing Address 3207 STEPP DR

City COLUMBIA State SC Zip Code 29204

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2016

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period  
 100.00

Memo Item  
CASJ

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

Mailing Address 18 DANDRIDGE CT

City COLUMBIA State SC Zip Code 29209

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2016

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period  
 100.00

Memo Item  
CHECK

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

Mailing Address 2425 MONROE ST

City COLUMBIA State SC Zip Code 29205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NOT EMPLOYED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 218.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2016

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period  
 25.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 225.00

**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 6 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BUTTS, DOROTHEA, , ,**  
 Mailing Address 235 RIVER CREEK DR  
 City IRMO State SC Zip Code 29063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Not employed Occupation Not employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 370.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2016  
**Transaction ID : SA11AI.4207**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**B.** Full Name (Last, First, Middle Initial)  
**BUTTS, DOROTHEA, , ,**  
 Mailing Address 235 RIVER CREEK DR  
 City IRMO State SC Zip Code 29063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Not employed Occupation Not employed  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 470.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2016  
**Transaction ID : SA11AI.4209**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**C.** Full Name (Last, First, Middle Initial)  
**BUTTS, DOROTHEA, , ,**  
 Mailing Address 235 RIVER CREEK DR  
 City IRMO State SC Zip Code 29063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Not employed Occupation Not employed  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2016  
**Transaction ID : SA11AI.4210**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00  
**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 7 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BUTTS, DOROTHEA, , ,**

Mailing Address 235 RIVER CREEK DR

City IRMO State SC Zip Code 29063

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

Name of Employer Not employed Occupation Not employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
670.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 31 2016

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

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

Mailing Address 235 RIVER CREEK DR

City IRMO State SC Zip Code 29063

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
770.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 27 2016

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

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

Mailing Address 1900 COFIELD DR

City WEST COLUMBIA State SC Zip Code 29169

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

Name of Employer NONE Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 21 2016

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period  
225.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 8 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DENT, MAX, , ,**

Mailing Address 1900 COFIELD DR

City WEST COLUMBIA State SC Zip Code 29169

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2016

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period  
50.00

Memo Item  
ACTBLUE

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

Mailing Address 4165 E BUCHANAN DR

City COLUMBIA State SC Zip Code 29206

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period  
40.00

Memo Item  
ACTBLUE

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

FEC ID number of contributing federal political committee. C

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 07 / 2016

Transaction ID : SA11AI.4273

Amount of Each Receipt this Period  
10.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 100.00

**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 9 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDGAR, MICHELLE, , ,**

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

FEC ID number of contributing federal political committee. C

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
330.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 15 / 2016

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period  
50.00

Memo Item  
ACTBLUE

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

FEC ID number of contributing federal political committee. C

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2016

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period  
20.00

Memo Item  
ACTBLUE

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

FEC ID number of contributing federal political committee. C

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
460.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 05 / 2016

Transaction ID : SA11AI.4939

Amount of Each Receipt this Period  
110.00

Memo Item  
In-kind - WALMART-SUPPLIES FOR EVENT

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

**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 10 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDGAR, MICHELLE, , ,**

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
569.00

Date of Receipt  
08 / 06 / 2016

Transaction ID : SA11AI.4937

Amount of Each Receipt this Period  
31.00

Memo Item  
In-kind - DOLLAR STORE-OFFICE SUPPLIES/SNACKS

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
538.00

Date of Receipt  
08 / 06 / 2016

Transaction ID : SA11AI.4938

Amount of Each Receipt this Period  
78.00

Memo Item  
In-kind - SAMS CLUB-FOOD FOR EVENT

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
570.00

Date of Receipt  
08 / 16 / 2016

Transaction ID : SA11AI.4277

Amount of Each Receipt this Period  
1.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 110.00

**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 11 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDGAR, MICHELLE, , ,**

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
685.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period  
115.00

Memo Item  
In-kind - SAMS/BILO-FOOD FOR MESA EVENT

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
707.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 26 / 2016

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period  
22.00

Memo Item  
In-kind - TARGET-PAPER

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
925.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.4940

Amount of Each Receipt this Period  
62.00

Memo Item  
In-kind - WALMART-SUPPLIES FOR EVENT

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 199.00

**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 12 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDGAR, MICHELLE, , ,**

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
863.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.4941

Amount of Each Receipt this Period  
68.00

Memo Item  
In-kind - CAFE PRESS-SUPPLIES FOR EVENT

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
795.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period  
88.00

Memo Item  
In-kind - JOANNS-SUPPLIES FOR EVENT

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
926.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2016

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period  
1.00

Memo Item  
ACBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 157.00

**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 13 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDGAR, MICHELLE, , ,**

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **982.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2016

Transaction ID : SA11AI.4945

Amount of Each Receipt this Period  
 56.00

Memo Item  
 In-kind - STAPLES-OFFICE SUPPLIES

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

Mailing Address 24 STONE MARKET RD

City COLUMBIA State SC Zip Code 29212

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

Name of Employer RESEARCH ANALYST Occupation UNIVERSITY OF SOUTH CAROLINA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **1005.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2016

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period  
 23.00

Memo Item  
 In-kind - TARGET-SUPPLIES FOR EVENT

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

Mailing Address 201 ALLENBROOKE WAY

City LEXINGTON State SC Zip Code 29072

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

Name of Employer NONE Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2016

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period  
 25.00

Memo Item  
 ACTBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **104.00**

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

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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAMBERTON, CATHERINE, , ,**

Mailing Address 221 ORR RD

City UPPER ST CLAIR	State PA	Zip Code 15241
------------------------	-------------	-------------------

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

Name of Employer UNIVERSITY OF PITTSBURGH	Occupation PROFESSOR
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

**Transaction ID : SA11AI.4428**

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

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

Mailing Address 221 ORR RD

City UPPER ST CLAIR	State PA	Zip Code 15241
------------------------	-------------	-------------------

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

Name of Employer UNIVERSITY OF PITTSBURGH	Occupation PROFESSOR
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2950.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

**Transaction ID : SA11AI.4430**

Amount of Each Receipt this Period  
50.00

Memo Item  
ACTBLUE

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

Mailing Address 1306 SILVER POINT RD

City CHAPIN	State SC	Zip Code 29036
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation
--------------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

**Transaction ID : SA11AI.4457**

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MADEO, MARIA, DIANA, ,**  
Mailing Address 4424 WILDCAT LN

City COLUMBIA State SC Zip Code 29209

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 15 2016

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period  
300.00

Memo Item  
CHECK

**B.** Full Name (Last, First, Middle Initial)  
**MANNING, JIM, , ,**  
Mailing Address 4631 BRIARFIELD RD

City COLUMBIA State SC Zip Code 29205

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
393.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 06 2016

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period  
43.00

Memo Item  
CHECK

**C.** Full Name (Last, First, Middle Initial)  
**MCANDREW, DORIS, MCGARRY, ,**  
Mailing Address 88 RIDGE LAKE DR

City COLUMBIA State SC Zip Code 29209

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

Name of Employer Occupation  
RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 27 2016

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period  
250.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 593.00

**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 16 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MCANDREW, DORIS, MCGARRY, ,**

Mailing Address 88 RIDGE LAKE DR

City COLUMBIA State SC Zip Code 29209

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

Name of Employer RETIRED Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.4487

Amount of Each Receipt this Period  
250.00

Memo Item  
ACTBLUE

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

Mailing Address 2626 STRATFORD RD

City COLUMBIA State SC Zip Code 29204

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

Name of Employer RETIRED Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 12 / 2016

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period  
2000.00

Memo Item  
CHECK

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

Mailing Address 216 SHOAL WOOD DR

City LEXINGTON State SC Zip Code 29072

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

Name of Employer LEXINGTON MEDICAL CENTER Occupation physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 05 / 2016

Transaction ID : SA11AI.4534

Amount of Each Receipt this Period  
200.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2450.00

**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 17 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NIMMICH, MITCHELL, , ,**  
 Mailing Address 216 SHOAL WOOD DR  
 City LEXINGTON State SC Zip Code 29072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEXINGTON MEDICAL CENTER Occupation physician  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2016  
**Transaction ID : SA11AI.4536**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**B.** Full Name (Last, First, Middle Initial)  
**NIMMICH, MITCHELL, , ,**  
 Mailing Address 216 SHOAL WOOD DR  
 City LEXINGTON State SC Zip Code 29072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEXINGTON MEDICAL CENTER Occupation physician  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2016  
**Transaction ID : SA11AI.4537**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**C.** Full Name (Last, First, Middle Initial)  
**NIMMICH, MITCHELL, , ,**  
 Mailing Address 216 SHOAL WOOD DR  
 City LEXINGTON State SC Zip Code 29072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEXINGTON MEDICAL CENTER Occupation physician  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2016  
**Transaction ID : SA11AI.4538**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 ACTBLUE

**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 18 OF 48  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NIMMICH, MITCHELL, , ,**

Mailing Address 216 SHOAL WOOD DR

City LEXINGTON State SC Zip Code 29072

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

Name of Employer LEXINGTON MEDICAL CENTER Occupation physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1550.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 30 2016

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

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

Mailing Address 313 RIVER WALK DR

City SIMPSONVILLE State SC Zip Code 29681

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

Name of Employer ALMEGACY LLC Occupation VP CONSULTIN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 21 2016

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

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

Mailing Address 313 RIVER WALK DR

City SIMPSONVILLE State SC Zip Code 29681

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

Name of Employer ALMEGACY LLC Occupation VP CONSULTIN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 09 2016

Transaction ID : SA11AI.4564

Amount of Each Receipt this Period  
100.00

Memo Item  
ACTBLUE

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**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 19 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RANDALL, MICHAEL, , ,**  
 Mailing Address 313 RIVER WALK DR  
 City SIMPSONVILLE State SC Zip Code 29681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALMEGACY LLC Occupation VP CONSULTIN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2016  
**Transaction ID : SA11AI.4565**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**B.** Full Name (Last, First, Middle Initial)  
**RANDALL, MICHAEL, , ,**  
 Mailing Address 313 RIVER WALK DR  
 City SIMPSONVILLE State SC Zip Code 29681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALMEGACY LLC Occupation VP CONSULTIN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 28 2016  
**Transaction ID : SA11AI.4566**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 ACTBLUE

**C.** Full Name (Last, First, Middle Initial)  
**SMITH, KARL, , ,**  
 Mailing Address 124 DARBY WAY  
 City WEST COLUMBIA State SC Zip Code 29170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACCELERATIONS EDUC SOFTWARE Occupation ENGINEER/EDUCATOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 20 2016  
**Transaction ID : SA11AI.4639**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 CASH

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**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 20 OF 48	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**VAN DUYS, JOHN, , ,**

Mailing Address 2313 BERMUDA HILLS RD

City COLUMBIA	State SC	Zip Code 20223
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation
-----------------------------	------------

Receipt For: 2016  
 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 / 2016

**Transaction ID : SA11AI.4674**

Amount of Each Receipt this Period  
250.00

Memo Item  
CHECK

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6293.00

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

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

FOR LINE NUMBER: PAGE 21 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2016

Transaction ID : SA11B.4909

Amount of Each Receipt this Period  
1500.00

Memo Item  
CHECK

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 SEVENTH ST, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2016

Transaction ID : SA11B.4907

Amount of Each Receipt this Period  
2000.00

Memo Item  
CHECK

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

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

3500.00

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 22 OF 48	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2925.66

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 03 / 2016

**Transaction ID : SA11D.4934**

Amount of Each Receipt this Period  
73.47

Memo Item  
In-kind - VISTA PRINT-BUSINESS CARDS

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2978.57

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

**Transaction ID : SA11D.4912**

Amount of Each Receipt this Period  
52.91

Memo Item  
In-kind - TARGET- computer ink

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3108.57

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

**Transaction ID : SA11D.4914**

Amount of Each Receipt this Period  
130.00

Memo Item  
In-kind - FACEBOOK ADS

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	256.38
<b>TOTAL</b> 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 23 OF 48
	<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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3109.57

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2016

**Transaction ID : SA11D.4904**

Amount of Each Receipt this Period  
1.00

Memo Item  
ACTBLUE

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3151.04

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2016

**Transaction ID : SA11D.4915**

Amount of Each Receipt this Period  
41.47

Memo Item  
In-kind - USPS PO BOX RENTAL/POSTAGE

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3196.03

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2016

**Transaction ID : SA11D.4916**

Amount of Each Receipt this Period  
44.99

Memo Item  
In-kind - VISTA PRINT BUSINESS CARDS

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	87.46
<b>TOTAL</b> 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 24 OF 48	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3282.02

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2016

**Transaction ID : SA11D.4917**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 85.99

Memo Item  
 In-kind - VISTA PRINT - stickers/envelopes

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3491.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2016

**Transaction ID : SA11D.4918**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 209.67

Memo Item  
 In-kind - FACEBOOK ADS

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

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 4491.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2016

**Transaction ID : SA11D.4905**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
 ACTBLUE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 1295.66
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 25 OF 48  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**  
 Mailing Address PO BOX 9059  
 City COLUMBIA State SC Zip Code 29290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RICHLAND COUNTY PUBLIC LIBRARY Occupation LIBRARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 6491.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2016  
**Transaction ID : SA11D.4906**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 ACTBLUE

**B.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**  
 Mailing Address PO BOX 9059  
 City COLUMBIA State SC Zip Code 29290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RICHLAND COUNTY PUBLIC LIBRARY Occupation LIBRARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 6741.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2016  
**Transaction ID : SA11D.4919**  
 Amount of Each Receipt this Period  
 250.01  
 Memo Item  
 In-kind - FACEBOOK ADS

**C.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**  
 Mailing Address PO BOX 9059  
 City COLUMBIA State SC Zip Code 29290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RICHLAND COUNTY PUBLIC LIBRARY Occupation LIBRARIAN  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 6811.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2016  
**Transaction ID : SA11D.4920**  
 Amount of Each Receipt this Period  
 69.99  
 Memo Item  
 In-kind - VISTA PRINT-BUSINESS CARDS

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2320.00  
**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 26 OF 48	
<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	

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)  
**BJORN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BJORN, ARIK, , ,**

Mailing Address PO BOX 9059

City COLUMBIA	State SC	Zip Code 29290
------------------	-------------	-------------------

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

Name of Employer RICHLAND COUNTY PUBLIC LIBRARY	Occupation LIBRARIAN
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6975.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11D.4921**

Amount of Each Receipt this Period  
163.32

Memo Item  
In-kind - FACEBOOK ADS

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	163.32
<b>TOTAL</b> This Period (last page this line number only)..... ▶	4122.82

**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 27 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 34.87
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5017</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 32.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5018</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 25.38
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5019</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	92.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 87.17
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5020
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 17.49
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5021
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C C00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	Category/ Type 001	Amount of Each Disbursement this Period 69.14
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5022
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	173.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 48	
	<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)  
**BJORN FOR CONGRESS**

**A. ACTBLUE**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: FEES Category/Type: 001

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 09 / 11 / 2016

FEC Identification Number: C \_\_\_\_\_

Amount of Each Disbursement this Period: 21.62

Transaction ID : SB17.5023

Memo Item

**B. ACTBLUE**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: FEES Category/Type: 001

Candidate Name: BJORN FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: SC District: 02

Date of Disbursement: 09 / 18 / 2016

FEC Identification Number: C C00612994

Amount of Each Disbursement this Period: 90.90

Transaction ID : SB17.5024

Memo Item

**C. ACTBLUE**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 441146

City: SOMERVILLE State: MA Zip Code: 02144

Purpose of Disbursement: FEES Category/Type: 001

Candidate Name: BJORN FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: SC District: 02

Date of Disbursement: 09 / 25 / 2016

FEC Identification Number: C C00612994

Amount of Each Disbursement this Period: 32.45

Transaction ID : SB17.5025

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 144.97

**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 30 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016
Mailing Address P.O. BOX 441146		FEC Identification Number C 00612994
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement FEES	<input type="checkbox"/> 001	Amount of Each Disbursement this Period 36.62
Candidate Name <b>BJORN FOR CONGRESS</b>	Category/ Type	Transaction ID : <b>SB17.5026</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC District: 02		

Full Name (Last, First, Middle Initial) <b>B. BJORN, ARIK, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2016
Mailing Address PO BOX 9059		FEC Identification Number C
City COLUMBIA	State SC	Zip Code 29290
Purpose of Disbursement In-kind - VISTA PRINT-BUSINESS CARDS	<input type="checkbox"/>	Amount of Each Disbursement this Period 73.47
Candidate Name	Category/ Type	Transaction ID : <b>SB17.4935</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BJORN, ARIK, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016
Mailing Address PO BOX 9059		FEC Identification Number C
City COLUMBIA	State SC	Zip Code 29290
Purpose of Disbursement In-kind - TARGET- computer ink	<input type="checkbox"/>	Amount of Each Disbursement this Period 52.91
Candidate Name	Category/ Type	Transaction ID : <b>SB17.4930</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	163.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 130.00		
Purpose of Disbursement In-kind - FACEBOOK ADS		Category/ Type	Transaction ID : SB17.4929		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 41.47		
Purpose of Disbursement In-kind - USPS PO BOX RENTAL/POSTAGE		Category/ Type	Transaction ID : SB17.4928		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 44.99		
Purpose of Disbursement In-kind - VISTA PRINT BUSINESS CARDS		Category/ Type	Transaction ID : SB17.4927		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	216.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 48			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 85.99		
Purpose of Disbursement In-kind - VISTA PRINT - stickers/envelopes			Transaction ID : SB17.4926		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 209.67		
Purpose of Disbursement In-kind - FACEBOOK ADS			Transaction ID : SB17.4925		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016		
Mailing Address PO BOX 9059			FEC Identification Number C		
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 250.01		
Purpose of Disbursement In-kind - FACEBOOK ADS			Transaction ID : SB17.4924		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	545.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2016	
Mailing Address PO BOX 9059			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 69.99	
Purpose of Disbursement In-kind - VISTA PRINT-BUSINESS CARDS			Transaction ID : SB17.4923	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BJORN, ARIK, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016	
Mailing Address PO BOX 9059			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29290	Amount of Each Disbursement this Period 163.32	
Purpose of Disbursement In-kind - FACEBOOK ADS			Transaction ID : SB17.4922	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DEMOCRATIC PARTY OF SOUTH CAROLINA</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2016	
Mailing Address PO BOX 5965			FEC Identification Number C C00612994	
City COLUMBIA	State SC	Zip Code 29250	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement EVENT FEE			Transaction ID : SB17.4994	
Candidate Name <b>BJORN FOR CONGRESS</b>			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	433.31
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 78.00	
Purpose of Disbursement In-kind - SAMS CLUB-FOOD FOR EVENT			Transaction ID : SB17.4955	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 115.00	
Purpose of Disbursement In-kind - SAMS/BILO-FOOD FOR MESA EVENT			Transaction ID : SB17.4951	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 22.00	
Purpose of Disbursement In-kind - TARGET-PAPER			Transaction ID : SB17.4950	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	215.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 88.00	
Purpose of Disbursement In-kind - JOANNS-SUPPLIES FOR EVENT			Transaction ID : SB17.4949	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 68.00	
Purpose of Disbursement In-kind - CAFE PRESS-SUPPLIES FOR EVENT			Transaction ID : SB17.4952	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EDGAR, MICHELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016	
Mailing Address 24 STONE MARKET RD			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29212	Amount of Each Disbursement this Period 62.00	
Purpose of Disbursement In-kind - WALMART-SUPPLIES FOR EVENT			Transaction ID : SB17.4953	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	218.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EDGAR, MICHELLE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016
Mailing Address 24 STONE MARKET RD		FEC Identification Number C
City COLUMBIA	State SC	Zip Code 29212
Purpose of Disbursement In-kind - STAPLES-OFFICE SUPPLIES		Amount of Each Disbursement this Period 56.00
Candidate Name		Transaction ID : SB17.4948
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EDGAR, MICHELLE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016
Mailing Address 24 STONE MARKET RD		FEC Identification Number C
City COLUMBIA	State SC	Zip Code 29212
Purpose of Disbursement In-kind - TARGET-SUPPLIES FOR EVENT		Amount of Each Disbursement this Period 23.00
Candidate Name		Transaction ID : SB17.4947
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GEORGETOWN QUALITY INN &amp; SUITES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2016
Mailing Address 210 CHURCH ST		FEC Identification Number C C00612994
City GEORGETOWN	State SC	Zip Code 29440
Purpose of Disbursement HOTEL STAY FOR EVENT		Amount of Each Disbursement this Period 219.78
Candidate Name <b>BJORN FOR CONGRESS</b>		Transaction ID : SB17.4988
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	298.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOORE, LAWRENCE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016
Mailing Address 109 TILTING ROCK DRIVE		FEC Identification Number C C00612994
City HOPKINS	State SC	Zip Code 29061
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: SC District: 02	Transaction ID : SB17.5034 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MOORE, LAWRENCE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016
Mailing Address 109 TILTING ROCK DRIVE		FEC Identification Number C C00612994
City HOPKINS	State SC	Zip Code 29061
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: SC District: 02	Transaction ID : SB17.5035 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MOORE, LAWRENCE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016
Mailing Address 109 TILTING ROCK DRIVE		FEC Identification Number C C00612994
City HOPKINS	State SC	Zip Code 29061
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: SC District: 02	Transaction ID : SB17.5052 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 48	
	<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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5037	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>B. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5038	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>C. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5039	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 48	
	<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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5040	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>B. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5041	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>C. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5042	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5043	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>B. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5048	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>C. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5049	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5050	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>B. MOORE, LAWRENCE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016	
Mailing Address 109 TILTING ROCK DRIVE			FEC Identification Number C C00612994	
City HOPKINS	State SC	Zip Code 29061	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5051	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

Full Name (Last, First, Middle Initial) <b>C. REYES, MARIA, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2016	
Mailing Address 216 SETON HALL DR			FEC Identification Number C C00612994	
City COLUMBIA	State CA	Zip Code 29223	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRACT FOR SALARY		Category/ Type 001	Transaction ID : SB17.5068	
Candidate Name <b>BJORN FOR CONGRESS</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5067
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5066
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5065
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 48	
	<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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 500.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5057</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 500.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5064</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALARY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>SB17.5056</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 48	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**BJORN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALRY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5055
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALRY	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5054
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. REYES, MARIA, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2016
Mailing Address 216 SETON HALL DR		FEC Identification Number C C00612994
City COLUMBIA	State CA	Zip Code 29223
Purpose of Disbursement CONTRACT FOR SALRY	Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BJORN FOR CONGRESS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.5053
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 02	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	24801.24

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 48
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**BJORN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MCLEAN, SUSAN, MARIE, MRS,</b>			Nature of Debt (Purpose): CONTRACT FOR SALARY
Mailing Address 568 ABBEYHILL DRIVE			
City COLUMBIA	State SC	Zip Code 29229	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5002</b>	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MCLEAN, SUSAN, MARIE, MRS,</b>			Nature of Debt (Purpose): CONTRACT FOR SALARY
Mailing Address 568 ABBEYHILL DRIVE			
City COLUMBIA	State SC	Zip Code 29229	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5003</b>	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MCLEAN, SUSAN, MARIE, MRS,</b>			Nature of Debt (Purpose): CONTRACT FOR SALARY
Mailing Address 568 ABBEYHILL DRIVE			
City COLUMBIA	State SC	Zip Code 29229	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5004</b>	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="3000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**BJORN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MOORE, LAWRENCE, , ,**

Nature of Debt (Purpose):  
Salary

Mailing Address 109 TILTING ROCK DRIVE

City HOPKINS	State SC	Zip Code 29061
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Outstanding Balance Beginning This Period

Transaction ID : SD10.4827

10000.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

10000.00

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MOORE, LAWRENCE, , ,**

Nature of Debt (Purpose):  
Salary

Mailing Address 109 TILTING ROCK DRIVE

City HOPKINS	State SC	Zip Code 29061
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Outstanding Balance Beginning This Period

Transaction ID : SD10.4886

4300.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

3300.00

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**REYES, MARIA, , ,**

Nature of Debt (Purpose):  
Salary

Mailing Address 216 SETON HALL DR

City COLUMBIA	State CA	Zip Code 29223
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Outstanding Balance Beginning This Period

Transaction ID : SD10.4826

5500.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

4500.00

1000.00

1) **SUBTOTALS** This Period This Page (optional) .....

2000.00

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

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**BJORN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>REYES, MARIA, , ,</b>			Nature of Debt (Purpose): Salary
Mailing Address 216 SETON HALL DR			
City COLUMBIA	State CA	Zip Code 29223	

Outstanding Balance Beginning This Period 4500.00	Transaction ID : <b>SD10.4885</b>	
Amount Incurred This Period 0.00	Payment This Period 4500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>REYES, MARIA, , ,</b>			Nature of Debt (Purpose): CONTRACT FOR SALARY
Mailing Address 216 SETON HALL DR			
City COLUMBIA	State CA	Zip Code 29223	

Outstanding Balance Beginning This Period 0.00	Transaction ID : <b>SD10.4999</b>	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>REYES, MARIA, , ,</b>			Nature of Debt (Purpose): CONTRACT FOR SALARY
Mailing Address 216 SETON HALL DR			
City COLUMBIA	State CA	Zip Code 29223	

Outstanding Balance Beginning This Period 0.00	Transaction ID : <b>SD10.5000</b>	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	2000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**BJORN FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>REYES, MARIA, , ,</b>			Nature of Debt (Purpose): <b>CONTRACT FOR SALARY</b>
Mailing Address <b>216 SETON HALL DR</b>			
City <b>COLUMBIA</b>	State <b>CA</b>	Zip Code <b>29223</b>	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5001</b>	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1000.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="8000.00"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text" value="8000.00"/>