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Image# 14960664757

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full	TYPE OR PRINT		ample: If typin er the lines.	g, type	12FE4M5	
Howie Lind for C	ongress					
<u> </u>						
	. DO D 070					
ADDRESS (number and st	treet) PO Box 878					
Check if differe	ent					
than previously reported. (ACC	Mclean				VA :	22101
2. FEC IDENTIFICAT	TION NUMBER ▼	CITY			STATE A	ZIP CODE
C C00557983		3. IS THIS REPORT	× NEW	OR	AMEND (A)	STATE ▼ DISTRICT
4. TYPE OF REPO	RT (Choose One)	(b) 12-Day PRE	-Election Repo	ort for the:		
(a) Quarterly Repo	rts:	П	Primary (12P)		General (1	2G) Runoff (12R)
April 15 Qu	uarterly Report (Q1)	×		-	_	
July 15 Qu	arterly Report (Q2)		Convention (12C)	Special (1	25)
October 15	Quarterly Report (Q3)	Election on	04 /	26	Y Y Y Y Y 2014	in the State of
January 31	Year-End Report (YE)	(c) 30-Day POS	T-Election Rep	port for the:		
			General (30G	i)	Runoff (30	R) Special (30S)
Termination	Report (TER)	Election on	M M /	D D /	Y	in the State of
5. Covering Period	M M / D D /	Y Y Y Y Y 2014	through	м м 04	/ D D /	Y Y Y Y Y 2014
I certify that I have exam	nined this Report and to	the best of my kr	nowledge and	belief it is tr	ue, correct and	l complete.
Type or Print Name of T	reasurer Michael Rumb	erg				
Signature of Treasurer	Michael Rumberg		[Electronically I	Filed] [Date 04	/ 14 / Y Y Y Y Y Y 2014
NOTE: Submission of fals	e, erroneous, or incomple	te information may	subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office			, 11 , 10	- 3 9	1,0000	
Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Howie Lind for Congress

01 04 06 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 20775.00 20775.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 20775.00 20775.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 102524.27 102524.27 (from Line 17) (b) Total Offsets to Operating 62.54 62.54 Expenditures (from Line 14)..... (c) Net Operating Expenditures 102461.73 102461.73 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 38313.27 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 120000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

(b) All Other Loans.....

(Refunds, Rebates, etc.)

(add Lines 13(a) and (b)).....

TOTAL LOANS

14. OFFSETS TO OPERATING EXPENDITURES

PAGE 3 / 35

0.00

62.54

120000.00

Write or Type Committee Name

Howie Lind for Congress

01 01 2014 04 2014 06 Report Covering the Period: To: From: **COLUMN B COLUMN A** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 18300.00 18300.00 (i) Itemized (use Schedule A)...... 2475.00 2475.00 (ii) Unitemized..... (iii) TOTAL of contributions 20775.00 20775.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate TOTAL CONTRIBUTIONS (other than loans) 20775.00 20775.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 120000.00 120000.00 Candidate.....

15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	140837.54	140837.54

0.00

62.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	102524.27	102524.27
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	102524.27	102524.27
	III. CASH SU	MMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	140837.54
5.	SUBTOTAL (add Line 23 and Line 24)		140837.54
6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	102524.27
7.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		38313.27

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		35
(check only one)										
X 11a 11b					11c		11	d		_
	12		13a		13b		14	ļ		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)
Howie Lind for Congress

\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress				
Δ	Full Name (Last, First, Middle Initial) Steven S Allen		Date of Receipt		
٦.	Mailing Address 2381 Gard Ave		02 28 2014		
	City Early	State Zip Code IN 50535	Transaction ID : SA11AI.4166		
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
	Name of Employer Retired	Occupation Retired	Contribution		
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 250.00			
В.	Full Name (Last, First, Middle Initial) Bruce W Boyd		Date of Receipt		
	Mailing Address 3609 1st Road S City	State Zip Code	03 / 31 / 2014		
	Arlington	VA 22204	Transaction ID : SA11AI.4321		
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
	Name of Employer Retired	Occupation Retired	Contribution		
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 250.00			
	Full Name (Last, First, Middle Initial) Stephen Breedwell		Date of Receipt		
Ο.	Mailing Address 13817 Ashvale Dr		03		
	City Fairfax	State Zip Code VA 22033	Transaction ID : SA11AI.4203		
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00		
	Name of Employer Techcorps, Inc	Occupation Real Estate Appraiser	Contribution		
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 250.00			
s	UBTOTAL of Receipts This Page (optional)		750.00		
Т	OTAL This Period (last page this line number of	only)	,		

SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:				PAGE		6	OF		35	
	(check only one)									
	X _{11a}		11b		11c		11	d		
	12		13a		13b		14	. [15

ITEMIZED RECEIPTS Detailed Summary Page 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Eric F Bush Date of Receipt Mailing Address 14529 Creek Branch Ct 2014 12 City State Zip Code Transaction ID: SA11AI.4131 VA 20120 Centreville FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Contribution Mitre Corp Systems Engineer Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas Carter Date of Receipt Mailing Address 2032 Ashburton Way 03 2014 Citv State Zip Code Transaction ID: SA11AI.4375 Mount Pleasant SC 29466 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **Govt Relations** Contribution Elbit Systems Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C.

Carl P Cecil		Date of Receipt
Mailing Address 4616 Sutton Oaks Dr		03 17 2014
City Chantilly	State Zip Code VA 20151	Transaction ID : SA11AI.4141
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	250.00
Schneider Electric	Sales	Contribution
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 450.00	

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 35 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c Detailed Summary Page 12 13a 13b 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Ronald Christenson Date of Receipt Mailing Address 43279 Warwick hills Ct 2014 18 City State Zip Code Transaction ID: SA11AI.4133 VA 20176 Leesburg FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Michael Giere Date of Receipt Mailing Address 4330 Greenberry Ln 01 2014 Citv State Zip Code Transaction ID: SA11AI.4344 Annandale VA 22003 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation In-kind - Policy Consultant fee Self Mortgage Broker Receipt For: 2014 Election Cycle-to-Date | Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) Steven Gremminger Date of Receipt Mailing Address 7121 Darby Rd 2014 26 City Zip Code State Transaction ID: SA11AI.4214 MD Bethesda 20817 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Self Attorney Contribution Receipt For: 2014 Election Cycle-to-Date | Yrimary General Other (specify) 500.00 2750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 8 OF 35 Use separate schedule(s) (check only one) 11a 11b 11c 12 13a 13b 14

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Chaz M Holland Jr. Date of Receipt Mailing Address 1522 Sadlers Wells Dr 2014 01 City State Zip Code Transaction ID: SA11AI.4371 VA 20170 Herndon FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Phyllis Lind Date of Receipt Mailing Address 9513 Veirs Drive Unit #1 18 2014 City State Zip Code Transaction ID: SA11AI.4158 Rockville MD 20850 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2600.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) Phyllis Lind Date of Receipt Mailing Address 9513 Veirs Drive Unit #1 2014 18 City Zip Code State Transaction ID: SA11AI.4160 MD Rockville 20850 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2600.00 Name of Employer Occupation Retired Retired Contribution Receipt For: 2014 Election Cycle-to-Date | General Primary 5200.00 Other (specify) 5700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 9 OF 35 (check only one) 11a 11b 11c 12

Use separate schedule(s) for each category of the Detailed Summary Page 13a 13b 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Edward G McAnaney Date of Receipt Mailing Address Suffield Village 2014 11 City State Zip Code Transaction ID: SA11AI.4125 CT 06078 Suffield FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Contribution Attorney McAnaney & McAnaney Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Harold Morgan Date of Receipt Mailing Address 18 31st St 05 2014 City State Zip Code Transaction ID: SA11AI.4387 Gulfport MS 35907 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Consultant Contribution **Election Impact Group** Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Aftab Qureshi Date of Receipt Mailing Address 6413 Divine St 2014 21 City State Zip Code Transaction ID: SA11AI.4147 VA Mclean 22101 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation World Bank Senior Advisor Contribution Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 500.00 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 10 OF 35 (check only one) 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Elizabeth Schafer Date of Receipt Mailing Address PO Box 616 2014 18 City State Zip Code Transaction ID: SA11AI.4161 DE 19958 Lewes FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2600.00 Name of Employer Occupation Contribution **US Postal Service** Treasurer Receipt For: 2014 Election Cycle-to-Date | Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) Elizabeth Schafer Date of Receipt Mailing Address PO Box 616 18 2014 City State Zip Code Transaction ID: SA11AI.4163 Lewes DE 19958 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2600.00 Name of Employer Occupation Treasurer Contribution **US Postal Service** Receipt For: 2014 Election Cycle-to-Date M General Primary 5200.00 Other (specify) Full Name (Last, First, Middle Initial) Sharon K Todd Date of Receipt Mailing Address 6605 Madison Mclean Dr 2014 25 City State Zip Code Transaction ID: SA11AI.4149 VA Mclean 22101 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Retired Contribution Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 1000.00 6200.00 SUBTOTAL of Receipts This Page (optional)..... 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	35	
(check only one)									
X 11a 11b					11c		11	d	_
	12		13a		13b		14		15

	and Statements may not be sold or used by any p ng the name and address of any political committe			
NAME OF COMMITTEE (In Full) Howie Lind for Congress				
Full Name (Last, First, Middle Initial) Thomas West		Poly of Possible		
Mailing Address 16408 Freemont Ln		Date of Receipt 04 04 04 04 2014		
City	City State Zip Code			
Purcellville	VA 20132	Transaction ID : SA11AI.4377		
FEC ID number of contributing federal political committee.	Ÿ U.			
Name of Employer	Occupation	400.00		
One Thing	Executive	Contribution		
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 400.00			
Full Name (Last, First, Middle Initial) Durbin Williams	,	Date of Receipt		
Mailing Address 107 Proclamation Dr		03 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Winchester	Transaction ID : SA11AI.4119			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation	250.00		
Retired	Retired	Contribution		
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date			
Full Name (Last, First, Middle Initial) Durbin Williams		Date of Receipt		
C. Mailing Address 107 Proclamation Dr		03 29 2014		
City Winchester	State Zip Code VA 22603	Transaction ID : SA11AI.4155		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation	250.00		
Retired	Retired	Contribution		
Receipt For: 2014	Election Cycle-to-Date	7		
Primary General Other (specify)	500.00			
SUBTOTAL of Receipts This Page (options	al)	900.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 OF 35 (check only one) 11a
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Howie Lind for Congress			
Full Name (Last, First, Middle Initial) Howard Rhodes Lind			
A. Mailing Address 1313 Rockland Terrace			Date of Receipt 02 12 2014
City	State	Zip Code	Transaction ID : SA13A.4169
Mclean	VA	22101	_
FEC ID number of contributing federal political committee.	С на	VA10121	Amount of Each Receipt this Period
Name of Employer Retired	Occupation Retired	1	Loan from Candidate
Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 75000.00]
Full Name (Last, First, Middle Initial) Howard Rhodes Lind			Date of Receipt
Mailing Address 1313 Rockland Terrace	03 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Mclean	State VA	Zip Code 22101	Transaction ID : SA13A.4171
FEC ID number of contributing federal political committee.	C H4	/A10121	Amount of Each Receipt this Period
Name of Employer Retired	Occupation Retired	1	Loan from Candidate
Receipt For: 2014 Primary General Other (specify)		ycle-to-Date 95000.00	
Full Name (Last, First, Middle Initial) Howard Rhodes Lind			Date of Receipt
C. Mailing Address 1313 Rockland Terrace			03 25 2014
City Mclean	State VA	Zip Code 22101	Transaction ID : SA13A.4172
FEC ID number of contributing federal political committee.	С н4	VA10121	Amount of Each Receipt this Period
Name of Employer Retired	Occupation Retired	1	Loan from Candidate
Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 120000.00	
SUBTOTAL of Receipts This Page (option	nal)		120000.00

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

ln	nage# 1496066476	69				
IT	EMIZED DIS		s and Statements m		ry of the ary Page used by any	FOR LINE NUMBER: PAGE 13 OF 35 (check only one) X
	NAME OF COMM	•	3	,,,,		
Α.		First, Middle Initial) RICT REPUBLIC PO BOX 650552	AN CONGRES	SIONAL CO	MMITTEE	Date of Disbursement O2 26 2014
	City POTOMAC FALL Purpose of Disbu Candidate Filing Candidate Name	ırsement	State VA	Zip Code 20165	008	Amount of Each Disbursement this Period 10000.00 Transaction ID: SB17.4188
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General	Category/ Type	
В.	Barchetta E	First, Middle Initial) Enterprises, LC 7138 Little River TP#	210			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Annandale Purpose of Disbu Acctg & Complia Candidate Name Office Sought:		State VA Disbursement For: Primary Other (s	General	001 Category/ Type	Amount of Each Disbursement this Period 1200.00 Transaction ID: SB17.4285
C.		First, Middle Initial)				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Round Rock Purpose of Disbu	ırsement ıt	•	o Code 8682	001	Amount of Each Disbursement this Period 676.26

FE5AN018

State:

Candidate Name

Office Sought:

House

Senate

District:

President

Disbursement For: 2014

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

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

Primary Other (specify)

11876.26

Transaction ID: SB17.4250

Category/ Type

General

SCHEDULE B (FEC Form 3)

PAGE 14 35 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Dell Computers 2014 Mailing Address 1 Dell Way 03 12 City State Zip Code Amount of Each Disbursement this Period TX Round Rock 78682 Purpose of Disbursement 233.19 Office equipment 001 Transaction ID: SB17.4255 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Dell Computers Date of Disbursement Mailing Address 1 Dell Way 03 13 2014 City State Zip Code Amount of Each Disbursement this Period TX 78682 Round Rock 179.14 Purpose of Disbursement Office equipment 001 Transaction ID: SB17.4264 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Election Impact Group Mailing Address 18 31st St 02 26 2014 City State Zip Code Amount of Each Disbursement this Period 39057 Gulfport MS Purpose of Disbursement 1500.00 Campaign Mgmt Consulting fee 001 Transaction ID : SB17.4190 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House General Senate Primary President Other (specify) State: District: 1912.33 SUBTOTAL of Disbursements This Page (optional).....

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

lm	nage# 14960664771			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER: PAGE 15 OF 35 (check only one) X 17
	by information copied from such Reports and Statements mathematical purposes, other than using the name and α			
	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
Α.	Full Name (Last, First, Middle Initial) Election Impact Group			Date of Disbursement
	Mailing Address 18 31st St			02 26 2014
	City State Gulfport MS	Zip Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse Travel expense		002	443.58 Transaction ID : SB17.4192
	Candidate Name		Category/ Type	
	Office Sought: House Senate President Disbursement For Primary Other (s	General		
_	State: District: Full Name (Last, First, Middle Initial)			
В.	Election Impact Group Mailing Address 18 31st St			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code		Amount of Fook Diskursement this Device
	Gulfport MS	39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing - stickers		001	1117.19 Transaction ID : SB17.4193
	Candidate Name		Category/ Type	
	Office Sought: House Senate President Disbursement For Primary Other (s	General		
	State: District: Full Name (Last, First, Middle Initial)			
C.	Election Impact Group		Date of Disbursement	
	Mailing Address 18 31st St		02 26 2014	
	Gulfport MS 3	p Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies Candidate Name		001	301.17 Transaction ID : SB17.4194
	Office Sought: House Dishursement For		Category/ Type	

Primary

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

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

Other (specify)

Senate

District:

President

General

State:

SCH ITE

lm	nage# 14960664772			
IT	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate so for each catego Detailed Summa	ry of the ary Page	FOR LINE NUMBER: PAGE 16 OF 35 (check only one) X 17
	y information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
A.	Full Name (Last, First, Middle Initial) Election Impact Group			Date of Disbursement
	Mailing Address 18 31st St			03 06 2014
	City State Gulfport MS	Zip Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting fee Candidate Name		001 Category/	1500.00 Transaction ID : SB17.4223
	Office Sought: House Senate President State: Disbursement For Disbursem		Туре	
_	Full Name (Last, First, Middle Initial)			
В.	Election Impact Group			Date of Disbursement
	Mailing Address 18 31st St			03 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Gulfport MS	Zip Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing Expense, letterhead, envelopes		001	2560.00 Transaction ID : SB17.4225
	Candidate Name		Category/ Type	
	Office Sought: House Senate President State: Disbursement For Primar Other			
	Full Name (Last, First, Middle Initial)			
C.	Election Impact Group			Date of Disbursement
	Mailing Address 18 31st St			03 / D D / Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z Z
		Zip Code		Amount of Each Disbursement this Period
	Gulfport MS Purpose of Disbursement	39057		1185.91
	Office supplies		001	1

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

State:

Candidate Name

Office Sought:

House

Senate

District:

President

Disbursement For: 2014

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

Primary

Other (specify)

5245.91

Transaction ID: SB17.4226

Category/ Type

General

lm	nage# 14960664773			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each category Detailed Summan	nedule(s) y of the	FOR LINE NUMBER: PAGE 17 OF 35 (check only one) X 17
	ny information copied from such Reports and Statement for commercial purposes, other than using the name a			
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress	,		
۹.	Full Name (Last, First, Middle Initial) Election Impact Group			Date of Disbursement
	Mailing Address 18 31st St			03 12 2014
	City State Gulfport MS	Zip Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting fee, reimburse office supplies & postage		001	2379.10 Transaction ID : SB17.4263
	Candidate Name		Category/ Type	
	State: District:			
3.	Full Name (Last, First, Middle Initial) Election Impact Group Mailing Address 18 31st St			Date of Disbursement M M M / D D / Y Y Y Y Y 03 21 2014
	City State Gulfport MS	Zip Code 39057		Amount of Each Disbursement this Period
	Purpose of Disbursement Consultant fee		001	1600.00 Transaction ID : SB17.4288
	Candidate Name		Category/ Type	Halisaction ID . 3517.4200
	State: District:			
	Full Name (Last, First, Middle Initial) Election Impact Group			Date of Disbursement
j.	Mailing Address 18 31st St			03 / D D / Y Y Y Y Y Y 2014
	City State	Zip Code		Amount of Each Disbursement this Period
	Gulfport MS Purpose of Disbursement Consulting fee	39057	004	1500.00
	Candidate Name		001 Category/ Type	Transaction ID : SB17.4310
	Office Sought: House Disbursement Senate Prim			

Other (specify)

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

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

President

District:

State:

SCHEDULE B (FEC Form 3)

PAGE 18 35 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Michael Giere 2014 Mailing Address 4330 Greenberry Ln 02 City State Zip Code Amount of Each Disbursement this Period VA Annandale 22003 Purpose of Disbursement 500.00 Policy Consultant fee 001 Transaction ID: SB17.4178 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Michael Giere Date of Disbursement Mailing Address 4330 Greenberry Ln 02 24 2014 City State Zip Code Amount of Each Disbursement this Period VA 22003 Annandale 500.00 Purpose of Disbursement Policy Consultant fee 001 Transaction ID: SB17.4186 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Michael Giere Mailing Address 4330 Greenberry Ln 03 03 2014 City State Zip Code Amount of Each Disbursement this Period 22003 Annandale VA Purpose of Disbursement 500.00 Consultant fee 001 Transaction ID: SB17.4216 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) State: District: 1500.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

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

	FOR LINE	E NUMBE	R:		PAG	GE	19	OF	35
Use separate schedule(s) for each category of the Detailed Summary Page	(check or	17 20a		18 20b		-	19a 20c		19b
ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.									

Any information copied from such Reports and Statement or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)			
Howie Lind for Congress			
Full Name (Last, First, Middle Initial) A. Michael Giere Mailing Address 4330 Greenberry Ln			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sta Annandale VA Purpose of Disbursement Consultant fee Candidate Name	ate Zip Code A 22003	001 Category/	Amount of Each Disbursement this Period 500.00 Transaction ID: SB17.4273
Senate President O State: District:	ent For: 2014 rimary General Other (specify)	Туре	
B. Full Name (Last, First, Middle Initial) Michael Giere Mailing Address 4330 Greenberry Ln			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Annandale V. Purpose of Disbursement Consultant fee Candidate Name	ate Zip Code A 22003 ent For: 2014	001 Category/ Type	Amount of Each Disbursement this Period 500.00 Transaction ID: SB17.4277
Senate X P	rimary General Other (specify)		
C. Michael Giere Mailing Address 4330 Greenberry Ln			Date of Disbursement O3 18 2014
City State Annandale VA Purpose of Disbursement Consultant fee Candidate Name Office Sought: House Senate President President State VA Disbursement Consultant fee	Zip Code 22003 ent For: 2014 rimary General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4278
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			1500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Howie Lind for Congress

Michael Giere

Purpose of Disbursement Consultant fee

City

Annandale

Candidate Name

Full Name (Last, First, Middle Initial)

Mailing Address 4330 Greenberry Ln

PAGE 20 35 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 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. Date of Disbursement 2014 03 Zip Code Amount of Each Disbursement this Period 22003 500.00

Transaction ID: SB17.4305

001

Category/

001

Category/ Type

				Type	
	Office Sought:	House Senate President District:	Disbursement For: 2014 Primary General Other (specify)		
_		First, Middle Initial)			
В.	Michael Gie				Date of Disbursement
		4330 Greenberry Ln			04 01 2014
	City		State Zip Code		Amount of Each Disbursement this Period
	Annandale		VA 22003		
	Purpose of Disbu In-kind - Policy C	rsement Consultant fee			2000.00 Transaction ID : SB17.4345
	Candidate Name			Category/ Type	
	Office Sought:	House	Disbursement For: 2014		_
		Senate	Primary General		
		President	Other (specify)		
	State:	District:			
	•	First, Middle Initial)			
C.	Gretchen H	ahn			Date of Disbursement
					M M / D D / Y Y Y
	Mailing Address	11033 Thrush Ridge R	d		03 12 2014

General

Zip Code

20191

State

VA

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

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

Disbursement For: 2014

Primary

Other (specify)

State

VΑ

FE5AN018

City

Reston

State:

Purpose of Disbursement

House Senate

District:

President

Consultant fee

Candidate Name

Office Sought:

Amount of Each Disbursement this Period

Transaction ID: SB17.4262

700.00

ITEMIZED DISBURSEMENTS

Image# 14960664777 PAGE 21 35 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) A. Phillip Hamilton Date of Disbursement 2014 Mailing Address 147 Yorktown Dr 03 80 City State Zip Code Amount of Each Disbursement this Period VA Ruther Glen 22546 Purpose of Disbursement 1060.53 Consultant fee, reimburse travel expense 001 Transaction ID: SB17.4235 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Phillip Hamilton Date of Disbursement Mailing Address 147 Yorktown Dr 03 21 2014 City State Zip Code Amount of Each Disbursement this Period VA 22546 Ruther Glen 1666.21 Purpose of Disbursement Consulting fee 001 Transaction ID: SB17.4291 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Charles Kettner Mailing Address POB 68448 02 26 2014 City State Zip Code Amount of Each Disbursement this Period Virginia Beach VA 23471 Purpose of Disbursement 2000.00 Public Relations Consulting fee 001 Transaction ID : SB17.4196 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General

State:

Senate

District:

President

Primary

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

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

Other (specify)

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 22 OF 35 (check only one) X 17
					person for the purpose of soliciting contributions ee to solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Howie Lind for Congress				
۹.	Full Name (Last, First, Middle Initial) Howard Rhodes Lind				Date of Disbursement
	Mailing Address 1313 Rockland Terrace				02 18 2014
	City Mclean	State VA	Zip Code 22101		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse Reston GOP Dinner Registration			011	650.00 Transaction ID : SB17.4173
	Candidate Name			Category/ Type	
	Office Sought: House Senate President State: VA District: 10	Primary Other (s	General		
	Full Name (Last, First, Middle Initial)				
3.	Howard Rhodes Lind Mailing Address 1313 Rockland Terrace				Date of Disbursement O2 18 2014
					02 10 2014
	City Mclean	State VA	Zip Code 22101		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse Campaign Manager Retainer Fee			001	6000.00 Transaction ID : SB17.4174
	Candidate Name			Category/ Type	Transaction is 1 05 m.4 m.4
	Senate President	rsement For Primary Other (s	General		
	State: VA District: 10				
Э.	Full Name (Last, First, Middle Initial) Howard Rhodes Lind				Date of Disbursement
	Mailing Address 1313 Rockland Terrace				02 18 2014
	Mclean		p Code 2101		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse Campaign Manager travel expense			002	1318.50 Transaction ID : SB17.4175
	Candidate Name			Category/ Type	
	Senate President	rsement For Primary Other (s	General		
	State: VA District: 10				
					7068 50

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate scriedule(s)		FOR LINE NUMBER: PAGE 23 OF 35 (check only one) X 17
	ny information copied from such Reports and Statemer for commercial purposes, other than using the name			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
Α.	Full Name (Last, First, Middle Initial) Howard Rhodes Lind			Date of Disbursement
	Mailing Address 1313 Rockland Terrace			02 18 2014
	City State Mclean VA	e Zip Code 22101		Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse Field Director Retainer (Orndorff)		001	3000.00 Transaction ID : SB17.4176
	Candidate Name		Category/ Type	
		t For: 2014 mary General er (specify)		
В.	Full Name (Last, First, Middle Initial) Howard Rhodes Lind Mailing Address 1313 Rockland Terrace			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Amount of Each Disbursement this Period 250.00		
	Mclean VA 22101 Purpose of Disbursement Reimburse Frederick County GOP Dinner registation			
	Candidate Name		O11 Category/ Type	Transaction ID : SB17.4177
	President Oth	t For: 2014 mary General per (specify)	7,12	
_	State: VA District: 10 Full Name (Last, First, Middle Initial)			
C.	Mountaintop Media			Date of Disbursement
	Mailing Address POB 578	02 24 7 2014		
	City State Sparta NJ	Zip Code 07871		Amount of Each Disbursement this Period
	Purpose of Disbursement inv 7973 stationery, envelopes Candidate Name		001 Category/ Type	6762.87 Transaction ID : SB17.4181
		t For: 2014 mary General er (specify)	1 765	
_	State: District:			
				10012.87

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

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

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

	FOR LINE NUMBER:	PAGE 24 OF 35					
Use separate schedule(s)	(check only one)						
for each category of the Detailed Summary Page	X 17 18	19a 19b					
Detailed Suffilliary Page	20a 20b	20c 21					
ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.							
	Date of Dishursement	•					

				20a 20b 20c 21
	ny information copied from such Reports and Statements may not be so for commercial purposes, other than using the name and address of a			
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
A.	Full Name (Last, First, Middle Initial) Mountaintop Media Mailing Address POB 578			Date of Disbursement O2
	City State Zip Co Sparta NJ 07871 Purpose of Disbursement Printing - palm cards		001	Amount of Each Disbursement this Period 812.50
	Candidate Name Office Sought: House Disbursement For: 2014 Senate President Other (specify) State: District:	Ca	ategory/ Type	Transaction ID: SB17.4184
В.	Full Name (Last, First, Middle Initial) Mountaintop Media Mailing Address POB 578			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Sparta NJ 07871 Purpose of Disbursement Reimburse Travel Expense Candidate Name			Amount of Each Disbursement this Period 561.39 Transaction ID: SB17.4185
	Office Sought: House Senate President State: Disbursement For: 2014 Primary Other (specify)	eneral	Туре	
C.	Full Name (Last, First, Middle Initial) Mountaintop Media Mailing Address POB 578			Date of Disbursement M M / D D / Y Y Y Y Y Y Y 2014 _ 2014
	City State Zip Code Sparta NJ 07871 Purpose of Disbursement Radio Advertising 004 Candidate Name Category/			Amount of Each Disbursement this Period 11.15 Transaction ID : SB17.4195
	Office Sought: House Senate President Disbursement For: 2014 Primary Other (specify) State:	eneral	Туре	
	GUBTOTAL of Disbursements This Page (optional)			1385.04

		3 (FEC Form	-	Use separate sch	nedule(s) (FOR LINE NUMBER: PAGE 25 OF 35 check only one)		
ITEMIZED DISBURSEMENTS		Detailed Summar	y Page	X 17 18 19a 19b 20a 20b 20c 21				
						erson for the purpose of soliciting contributions to solicit contributions from such committee.		
	NAME OF COMM	MITTEE (In Full)						
	Howie Lind	for Congress						
	, ,	First, Middle Initial)				5(5:1		
A.	Mountainto	p Media	Date of Disbursement					
	Mailing Address	POB 578				03 05 2014		
	City		State	Zip Code		Amount of Each Disbursement this Period		
	Sparta		NJ	07871		11000 70		
	Purpose of Disbu Postage for mail				003	14063.76		
	Candidate Name					Transaction ID : SB17.4220		
					Category/ Type			
	Office Sought:	House	Disbursement For					
		Senate	Y Primary	General				
	State:	President District:	Other (s	pecity)				
		First, Middle Initial)						
В.	Mountainto	p Media				Date of Disbursement		
٥.					M M / D D / Y Y Y			
	Mailing Address POB 578					03 11 2014		
	City		State NJ	Zip Code 07871		Amount of Each Disbursement this Period		
	Sparta Purpose of Disbu	ırsement	INJ	0/6/1		3588.00		
	TV Video produ	ction			004	Transaction ID : SB17.4253		
	Candidate Name				Category/ Type	Transaction ib . 3517.4233		
	Office Sought:	House	Disbursement For					
		Senate	Primary					
	State:	President District:	Other (s	pecity)				
		First, Middle Initial)						
C.	Mountainto	,				Date of Disbursement		
	Mailing Address	POB 578				03 11 2014		
	City		•	o Code		Amount of Each Disbursement this Period		
	Sparta NJ 07871					12471.90		
	Purpose of Disbursement Printing - fundraising mailer			003	12471.90			
	Candidate Name				Category/ Type	Transaction ID : SB17.4254		
	Office Sought:	House	Disbursement For:	2014		_		
		Senate	Primary	General				
	State:	President	Other (s	pecify)				
	State:	District:						

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

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (d of the	OR LINE NUMBER: PAGE 26 OF 35 check only one) X 17
	y information copied from such Reports and Statements r for commercial purposes, other than using the name and			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
۱.	Full Name (Last, First, Middle Initial) Mountaintop Media			Date of Disbursement
	Mailing Address POB 578			03 21 2014
	City State Sparta NJ	Zip Code 07871		Amount of Each Disbursement this Period
	Purpose of Disbursement Video production Candidate Name		004	2825.00 Transaction ID : SB17.4289
	Office Sought: House Senate President State: Disbursement Fo Primary Other (s		Category/ Type	
3.	Full Name (Last, First, Middle Initial) Mountaintop Media Mailing Address POB 578			Date of Disbursement M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
	City State	Zip Code		Amount of Each Disbursement this Period
	Sparta NJ Purpose of Disbursement Radio advertising Candidate Name	07871	004 Category/ Type	3821.00 Transaction ID : SB17.4290
	Office Sought: House Disbursement Fo	/ General	.,,,,,	-
).	Full Name (Last, First, Middle Initial) Edward Newland Mailing Address 3102 Cameron Mills Rd			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Z	(ip Code 22302		Amount of Each Disbursement this Period
	Purpose of Disbursement Consultant fee Candidate Name		001 Category/ Type	500.50 Transaction ID : SB17.4251
	Office Sought: House Senate President State: Disbursement Fo Primary Other (s			
_	Oldio.			7146.50
				7140.50

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

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

City

City

State:

City

Candidate Name

Office Sought:

State:

House

Senate

District:

President

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 27 35 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Nova Digital Films 2014 Mailing Address 9702 Dublin Dr 03 17 State Zip Code Amount of Each Disbursement this Period VA Manassas 20109 Purpose of Disbursement 550.00 Video production 004 Transaction ID: SB17.4271 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Office Depot Date of Disbursement Mailing Address 11816 Spectrum Center 03 24 2014 State Zip Code Amount of Each Disbursement this Period VA 20191 Reston 23.87 Purpose of Disbursement Office supplies 001 Transaction ID: SB17.4293 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Office Depot Mailing Address 11816 Spectrum Center 03 2014 24 State Zip Code Amount of Each Disbursement this Period Reston VA 20191 Purpose of Disbursement 3.70 Office supplies 001

577.57

Transaction ID : SB17.4294

Category/ Type

General

Disbursement For: 2014

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

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

Primary

Other (specify)

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements me or for commercial purposes, other than using the name and statements.		
NAME OF COMMITTEE (In Full) Howie Lind for Congress		
Full Name (Last, First, Middle Initial) A. Office Depot Mailing Address 11816 Spectrum Center	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City State Reston VA Purpose of Disbursement Office supplies Candidate Name Office Sought: House Disbursement For Senate President Other (s	General	Amount of Each Disbursement this Period 52.21 Transaction ID : SB17.4300
State: District: Full Name (Last, First, Middle Initial)		
Office December 1		

	State:	District:				
	Full Name (Last,	First, Middle Initial)				
В.	Office Depo	ot	Date of Disbursement			
	Mailing Address	11816 Spectrum Cente	er			04 02 / Y Y Y Y Y 1
	City		State	Zip Code		Amount of Each Disbursement this Period
	Reston		VA	20191		Amount of Each Disbursement this Feriod
	Purpose of Disbursement Office supplies				001	9.85 Transaction ID : SB17.4355
	Candidate Name				Category/ Type	
	Office Sought:	House	Disbursement For:	2014		
		Senate	\times Primary	General		
		President	Other (spe	ecify)		
	State:	District:				
	Full Name (Last,	First, Middle Initial)	_			
C.	Office Depo	ot				Date of Disbursement

Office Depoi			
Mailing Address 1	1816 Spectrum Cen	ter	
City		State Zip Code	
Reston		VA 20191	
Purpose of Disbur Office supplies	sement		001
Candidate Name			Category/ Type
Office Sought:	House	Disbursement For: 2014	
	Senate	Primary Gene	eral
	President	Other (specify)	

Date of	Dio	Duio	CITIC	,,,,,,				
м м	/	D	D	/	Υ	Υ	Y	Υ
04			٦4			20	11/	

Amount	of	Each	Disbu	ursen	nent	this	Period
							9.81

Transaction ID: SB17.4356

State:	District:											
											81.87	7
SUBTOTAL (of Disbursements This Page	(optional)		-	-		-	-	-	_	01.07	
										T		П
TOTAL This	Period (last page this line nu	ımber only)	 -	-	-5	-	-	-5	-	_	_	

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary I	dule(s) (conf the	OR LINE NUMBER: PAGE 29 OF 35 check only one) X 17
	ny information copied from such Reports and Statements for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
۹.	Full Name (Last, First, Middle Initial) Office Depot			Date of Disbursement
	Mailing Address 11816 Spectrum Center			04 04 2014
	City State Reston VA	Zip Code 20191		Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies		001	31.21 Transaction ID : SB17.4357
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement F			
3.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 11816 Spectrum Center		Date of Disbursement Output Date of Disbursement Output Date of Disbursement Output Date of Disbursement Output Date of Disbursement	
	City State Reston VA	Zip Code 20191		Amount of Each Disbursement this Period
	Purpose of Disbursement Office supplies Candidate Name		001 Category/	25.35 Transaction ID : SB17.4366
	Office Sought: House Senate President State: Disbursement F Prima Other		Type	
Э.	Full Name (Last, First, Middle Initial) Craig Orndorff			Date of Disbursement
	Mailing Address 467 Toll House Rd			03 07 2014
	City State Maurertown VA Purpose of Disbursement Consultant - field director Candidate Name	Zip Code 22644	001 Category/ Type	Amount of Each Disbursement this Period 1500.00 Transaction ID: SB17.4229
	Office Sought: House Senate President Disbursement F Prima Other		.,,,,,	

State:

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

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

District:

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	dule(s) (c of the	OR LINE NUMBER: PAGE 30 OF 35 check only one) X 17
	ly information copied from such Reports and Statements refor commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress	, , ,		
۹.	Full Name (Last, First, Middle Initial) Craig Orndorff			Date of Disbursement
	Mailing Address 467 Toll House Rd			03 18 2014
	City State Maurertown VA	Zip Code 22644		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel expense		002	708.23 Transaction ID : SB17.4275
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement Formany			
3.	Full Name (Last, First, Middle Initial) Craig Orndorff Mailing Address 467 Toll House Rd			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Maurertown VA	Zip Code 22644		Amount of Each Disbursement this Period
	Purpose of Disbursement Consultant fee	22011	001	1500.00 Transaction ID : SB17.4282
	Candidate Name		Category/ Type	Transaction is . GST7.4202
	Office Sought: House Senate President State: Disbursement For Primary Other (
	Full Name (Last, First, Middle Initial)			Date of Disbursement
Э.	Craig Orndorff Mailing Address 467 Toll House Rd			03 21 2014 -
	City State Z	Zip Code		Amount of Each Disbursement this Period
	Maurertown VA 22644 Purpose of Disbursement Reimburse travel expense			375.08
	Candidate Name		002 Category/ Type	Transaction ID : SB17.4287
	Office Sought: House Senate President Disbursement Formany Other (

State:

District:

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statement or for commercial purposes, other than using the name at NAME OF COMMITTEE (In Full) Howie Lind for Congress Full Name (Last, First, Middle Initial) A. Cynthia Schmit		
Mailing Address 1940 Taylor Dr #3 City State Winchester VA Purpose of Disbursement Volunteer Coordinator fee Candidate Name	22601	Amount of Each Disbursement this Period 750.00 Transaction ID: SB17.4307
Office Sought: House Senate President State: Disbursement Othe		y/
Full Name (Last, First, Middle Initial) Cynthia Schmit Mailing Address 1940 Taylor Dr #3		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Winchester VA Purpose of Disbursement Travel expense Candidate Name	22601 002 Category	Amount of Each Disbursement this Period 91.11 Transaction ID: SB17.4309
State: District: Othe	For: 2014 eary General er (specify)	
Full Name (Last, First, Middle Initial) C. US Postal Service Mailing Address 8409 Lee Hwy		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y 2014
City State Merrifeld VA Purpose of Disbursement Postage Candidate Name Office Sought: House Senate President State: District:		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.4295

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

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	hedule(s) ry of the	FOR LINE NUMBER: PAGE 32 OF 35 check only one) X 17
	ry information copied from such Reports and Statements for commercial purposes, other than using the name and			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
۹.	Full Name (Last, First, Middle Initial) US Postal Service			Date of Disbursement
	Mailing Address 8409 Lee Hwy			04 04 2014
	City State Merrifeld VA	Zip Code 22081		Amount of Each Disbursement this Period
	Purpose of Disbursement Postage		001	147.00 Transaction ID : SB17.4358
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement F			
	State: District: Full Name (Last, First, Middle Initial)			
3.	Westin Hotel Mailing Address 11750 Sunrise Valley Dr			Date of Disbursement
		7:- 0		03 17 2014
	City State Reston VA	Zip Code 20191		Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging		002	88.48 Transaction ID : SB17.4270
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement F			
	Full Name (Last, First, Middle Initial)			
Э.				Date of Disbursement
	Mailing Address			M M / D D / Y Y Y
	City State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			, ,
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement F Senate Prima President Other			
	State: District:			

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

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

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SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

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(check only one) Detailed Summary Page Transaction ID: SC/10.4169 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify) 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 75000.00 0.00 75000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D12 ž014 0.00 5/31/2014 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 75000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4171 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify) 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 06 ž014 0.00 5/31/2014 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4172 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify) \blacktriangledown 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 03^M ž014 0.00 5/31/2014 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) 120000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.