

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 JOHNSON FOR CONGRESS

ADDRESS (number and street) PO BOX 14496 Check if different than previously reported. (ACC) POLAND OH 44514

2. FEC IDENTIFICATION NUMBER C C00476820 3. IS THIS REPORT NEW (N) OR AMENDED (A) OH 06

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 04/17/2014 through 06/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PERRY J CHICKONOSKI

Signature of Treasurer PERRY J CHICKONOSKI [Electronically Filed] Date MM/DD/YYYY 07/08/2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**JOHNSON FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	340876.69	1746681.50
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	8585.12
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	340376.69	1738096.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	141935.22	694904.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	145.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	141935.22	694759.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1206292.41	
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).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**JOHNSON FOR CONGRESS**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	112475.00	725193.53
(ii) Unitemized.....	10905.00	61577.10
(iii) TOTAL of contributions from individuals ▶	123380.00	786770.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	208588.75	946579.20
(d) The Candidate.....	8907.94	13331.67
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	340876.69	1746681.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	25106.81
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	145.17
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.94	5.75
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	340877.63	1771939.23

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	141935.22	694904.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	173.08
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	15000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	15000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	8585.12
(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)).....	500.00	8585.12
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	142435.22	718662.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1007850.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	340877.63
25. SUBTOTAL (add Line 23 and Line 24).....	1348727.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	142435.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1206292.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

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

Mailing Address **243 ECKHART ROAD**

City **LUCASVILLE** State **OH** Zip Code **45648**

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

Name of Employer **ERWIN DODSON ALLEN FUNERAL HOME** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11AI.94725**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **4590 TRANQUILITY PL.**

City **ZANESVILLE** State **OH** Zip Code **43701**

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

Name of Employer **DEUCE DIESEL, LLC** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 25 / 2014**

**Transaction ID : SA11AI.94498**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **404 FAIRWAY AVE**

City **ELMIRA** State **NY** Zip Code **14904**

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

Name of Employer **PETTA ENTERPRISES** Occupation **BUSINESS DEVELOPMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : SA11AI.94512**

Amount of Each Receipt this Period  
**150.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 51315 FIELDSTONE DR

City State Zip Code  
E LIVERPOOL OH 43920

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

Name of Employer Occupation  
AMATO LAW OFFICE ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : SA11AI.94942**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 225 MAPLE RIDGE DR.

City State Zip Code  
CANONSBURG PA 15317

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

Name of Employer Occupation  
RANGE RESOURCES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : SA11AI.94539**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address PO BOX 187

City State Zip Code  
NEW CONCORD OH 43762

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

Name of Employer Occupation  
BUCKEYE WATER SERVICE CO EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94402**

Amount of Each Receipt this Period  
500.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FRED BADERTSCHER**

Mailing Address **PO BOX 187**

City **NEW CONCORD** State **OH** Zip Code **43762**

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

Name of Employer **BUCKEYE WATER SERVICE CO** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : SA11AI.94403**

Amount of Each Receipt this Period  
**-500.00**

**[MEMO ITEM]  
REDESIGNATED TO G-2014**

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

Mailing Address **PO BOX 187**

City **NEW CONCORD** State **OH** Zip Code **43762**

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

Name of Employer **BUCKEYE WATER SERVICE CO** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : SA11AI.94404**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]  
REDESIGNATED FROM P-2014**

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

Mailing Address **45485 STATE ROUTE 145**

City **LEWISVILLE** State **OH** Zip Code **43754**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11AI.94711**

Amount of Each Receipt this Period  
**500.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES D. BARNETTE**

Mailing Address 211 1/2 S FAYETTE ST.

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
STEPTOE & JOHNSON, LLP PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.94597**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3333 N GLEBE ROAD

City State Zip Code  
ARLINGTON VA 22207

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

Name of Employer Occupation  
CHAMBER HILL STRATEGIES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11AI.94613**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1434 COLBURN DR

City State Zip Code  
ZANESVILLE OH 43701

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

Name of Employer Occupation  
REQUEST LETTER SENT ON 4/12/2014 REQUEST LETTER SENT ON 4/12/2014

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94779**

Amount of Each Receipt this Period  
500.00

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

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

1500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN BENYO**

Mailing Address 14020 BERLIN STATION RD

City BERLIN CENTER State OH Zip Code 44401

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

Name of Employer BRILEX INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94804**

Amount of Each Receipt this Period  
4800.00

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

Mailing Address 7006 FAIRVIEW RD

City AUSTINTOWN State OH Zip Code 44515

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

Name of Employer BRILEX INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94807**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 7006 FAIRVIEW RD

City AUSTINTOWN State OH Zip Code 44515

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94808**

Amount of Each Receipt this Period  
2600.00

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

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

10000.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.94804

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

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**PATRICIA J BENYO**

Mailing Address 6940 FAIRVIEW RD.

City State Zip Code  
YOUNGSTOWN OH 44515

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94639**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2417 WATERFORD RD.

City State Zip Code  
MARIETTA OH 45750

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

Name of Employer Occupation  
MARIETTA SILOS LLC CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : SA11AI.94841**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 109 ALFRED DR

City State Zip Code  
WINTERSVILLE OH 43953

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94730**

Amount of Each Receipt this Period  
200.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MARLENE F BRICK**

Mailing Address P.O. BOX 177

City State Zip Code  
PORT WASHINGTON OH 43837

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

Name of Employer Occupation  
J & M VETERINARIAN CONSULTING LLC OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : SA11AI.94375**

Amount of Each Receipt this Period  
225.00

IN-KIND:

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

Mailing Address 51 FLEMING RD

City State Zip Code  
LOWELL OH 45744

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

Name of Employer Occupation  
WATRFORD TANK & FABRICATION EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2014

**Transaction ID : SA11AI.94775**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 803 STEUBENVILLE AVE

City State Zip Code  
CAMBRIDGE OH 43725

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

Name of Employer Occupation  
DONALD D BROWN LAW OFFICES, LLC ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 27 / 2014

**Transaction ID : SA11AI.94395**

Amount of Each Receipt this Period  
250.00

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

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

675.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER BRUNTON**

Mailing Address 1223 GLENDALE RD.

City MARIETTA State OH Zip Code 45750

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

Name of Employer AMERICAN PRODUCERS SUPPLY CO Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94632**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FREDERICK E BRYAN III**

Mailing Address 8980 INDIAN RIDGE LANE

City CINCINNATI State OH Zip Code 45243

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

Name of Employer BRYAN EQUIPMENT Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.94381**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4534 PLEASANT RIDGE RD

City MARIETTA State OH Zip Code 45750

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

Name of Employer MARIETTA HEALTH CARE PHYSICIAN INC Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94778**

Amount of Each Receipt this Period  
150.00

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

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW CANTOR**

Mailing Address 4654 UPTON STREET, NW

City State Zip Code  
WASHINGTON DC 20016

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

Name of Employer Occupation  
PECK MADIGAN JONES LOBBYIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94846**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1735 FAIRVIEW AVE

City State Zip Code  
MCLEAN VA 22101

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

Name of Employer Occupation  
KOUNToupES CONSULTING, LLC CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.94796**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 114 PINEVIEW CIR

City State Zip Code  
MARIETTA OH 45750

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

Name of Employer Occupation  
CONDEVCO EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94508**

Amount of Each Receipt this Period  
1500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 329 S 7TH ST.

City MARIETTA State OH Zip Code 45750

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

Name of Employer: CHRISTY & ASSOCIATES Occupation: MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 28 / 2014

**Transaction ID : SA11AI.94766**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**TIMOTHY D CLARKE SR.**

Mailing Address 7850 GIVEN RD.

City CINCINNATI State OH Zip Code 45243

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

Name of Employer: NETHERLAND RUBBER Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 02 / 2014

**Transaction ID : SA11AI.94529**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 205 CHATHAM COURT

City WARREN State OH Zip Code 44484

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

Name of Employer: COLE VALLEY CADILLAC Occupation: EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 23 / 2014

**Transaction ID : SA11AI.94648**

Amount of Each Receipt this Period: 300.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 205 CHATHAM COURT

City WARREN State OH Zip Code 44484

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

Name of Employer COLE VALLEY CADILLAC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94706**

Amount of Each Receipt this Period  
-300.00

**[MEMO ITEM]**  
REATTRIBUTED TO COLE, MARIAN

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

Mailing Address 205 CHATHAM COURT

City WARREN State OH Zip Code 44484

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94707**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**  
REATTRIBUTED FROM COLE, DAVID

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

Mailing Address 2350 ASBURY CHAPEL RD.

City ZANESVILLE State OH Zip Code 43701

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94731**

Amount of Each Receipt this Period  
200.00

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

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

200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**TERESA DANKOVIC**

Mailing Address 1715 SCOTT AVENUE

City State Zip Code  
CAMBRIDGE OH 43725

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

Name of Employer Occupation  
GUERNSEY COUNT CLERK OF COURTS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94405**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 7143 GRAYSON DR

City State Zip Code  
CANFIELD OH 44406

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

Name of Employer Occupation  
FARMERS TRUST COMPANY PORTFOLIO MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94769**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4414 29TH STREET NW

City State Zip Code  
WASHINGTON DC 20008

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

Name of Employer Occupation  
BLANK ROME GOVERNMENT RELATIONS LL CONSULTING SERVICES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.94852**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DEAN PATRICK DECKER III**

Mailing Address 14014 STATE ROUTE 339

City WATERFORD State OH Zip Code 45786

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

Name of Employer DECKER DRILLING Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.94382**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 150 HAWTHORN DR.

City NEW CONCORD State OH Zip Code 43762

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

Name of Employer DEVCO OIL Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94397**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7896 DICKEY DRIVE

City LISBON State OH Zip Code 44432

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

Name of Employer HILLTOP ENERGY, INC Occupation SALESPERSON

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94812**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. ALFRED L DOHERTY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 23 / 2014
Mailing Address 87420 COUCH RD.		<b>Transaction ID : SA11AI.94741</b>
City JEWETT	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. LOUIS B EICHHOLD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 20 / 2014
Mailing Address 2985 KLEEMAN ROAD		<b>Transaction ID : SA11AI.94419</b>
City CINCINNATI	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer US PLAYING CARD CO.	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. THOMAS FENTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2014
Mailing Address 413 FORT ST		<b>Transaction ID : SA11AI.94771</b>
City MARIETTA	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 203.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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: (check only one)	PAGE 20 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**STANLEY FERET**

Mailing Address 4567 OLDE CHARTED TRAIL

City POLAND State OH Zip Code 44514

FEC ID number of contributing federal political committee. C

Name of Employer CORTLAND BANK Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94811**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 4020 GULFSHORE BLVD  
N UNIT 605

City NAPLES State FL Zip Code 34103

FEC ID number of contributing federal political committee. C

Name of Employer VALLEY ELECTRICAL CONSOLIDATED Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94810**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO BOX 87

City WARM SPRINGS State VA Zip Code 24484

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94712**

Amount of Each Receipt this Period  
 300.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1741 PEARCE CIR

City SALEM State OH Zip Code 44460

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

Name of Employer USAF Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94742**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 26239 NORTH ST

City COOLVILLE State OH Zip Code 45723

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94727**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 343 HIGHLAND AVE

City SALEM State OH Zip Code 44460

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

Name of Employer TRUE CUT INDUSTRIAL Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94644**

Amount of Each Receipt this Period  
200.00

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

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

500.00

**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 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CAROL RHODES GRAY**

Mailing Address 3238 SANDY RIDGE RD

City State Zip Code  
TIPPECANOE OH 44699

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : SA11AI.94936**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1904 DEPOT RD.

City State Zip Code  
SALEM OH 44460

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

Name of Employer Occupation  
GREENISEN FARMS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 07 / 2014

**Transaction ID : SA11AI.94499**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 426 2ND ST

City State Zip Code  
MARIETTA OH 45750

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

Name of Employer Occupation  
GREIG RESOURCES METALS BROKIER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94781**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**RONALD GUTHRIE**

Mailing Address **C/O K J R W TRUST**  
**P.O. BOX 157**

City **CAMBRIDGE** State **OH** Zip Code **43725**

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

Name of Employer **GUTHRIE INSURANCE AGENCY** Occupation **INSURANCE AGENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : SA11AI.94452**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **2080 NEELD RD**

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

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : SA11AI.94410**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address **2121 JAMIESON AVE**  
**UNIT 2109**

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

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

Name of Employer **SELF** Occupation **TAX PREPARATION**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : SA11AI.94414**

Amount of Each Receipt this Period  
**250.00**

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

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

**575.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>DAVID HAAS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2014	
Mailing Address 357 COUNTY HOUSE LN		<b>Transaction ID : SA11AI.94626</b>	
City MARIETTA	State OH	Zip Code 45750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer MORRISON INCORPORATED	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>NORMAN HAESSLY</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address 389 SHEETS RUN RD		<b>Transaction ID : SA11AI.94757</b>	
City MARIETTA	State OH	Zip Code 45750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer HAESSLY HARDWOOD LUMBER	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1450.00		

Full Name (Last, First, Middle Initial) <b>JUDITH A HEINRICH</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address P.O. 305		<b>Transaction ID : SA11AI.94509</b>	
City RENO	State OH	Zip Code 45773	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer CONDEVCO	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**GREG HENTHORN**

Mailing Address 262 WILLIAMS RD

City MORGANTOWN State WV Zip Code 26501

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

Name of Employer: FLAT ROCK Occupation: EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 04 / 27 / 2014

**Transaction ID : SA11AI.94396**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 262 WILLIAMS RD

City MORGANTOWN State WV Zip Code 26501

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

Name of Employer: FLAT ROCK Occupation: EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1750.00

Date of Receipt: 06 / 02 / 2014

**Transaction ID : SA11AI.94524**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 7108 REBECCA DRIVE

City ALEXANDRIA State VA Zip Code 22307

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

Name of Employer: BOKORNY GROUP Occupation: LOBBYIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 30 / 2014

**Transaction ID : SA11AI.94535**

Amount of Each Receipt this Period: 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JEFFERY D. HILDEBRAND**

Mailing Address 1201 LOUISIANA, SUITE 1400

City HOUSTON State TX Zip Code 77002

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

Name of Employer HILCORP ENERGY COMPANY Occupation CHAIRMAN/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.94607**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address PO BOX 247

City BYESVILLE State OH Zip Code 43723

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

Name of Employer DAVID R HILL INC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3745.09

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : SA11AI.94214**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 302 FRONT STREET

City WILLIAMSTOWN State WV Zip Code 26187

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

Name of Employer PAR MAR STORES Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94774**

Amount of Each Receipt this Period  
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**GEORGIA A HOON**

Mailing Address **224 KERRYWOOD DR.**

City **NEW MIDDLETOWN** State **OH** Zip Code **44442**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11AI.94728**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **1890 WYNNCREST DR**

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

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

Name of Employer **ARTEX OIL CO** Occupation **VICE PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : SA11AI.94502**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address **1865 BUGLE LN**

City **CLEARWATER** State **FL** Zip Code **33764**

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

Name of Employer **LAKEVIEW BAPTIST CHURCH** Occupation **ASSOCIATE PASTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : SA11AI.94533**

Amount of Each Receipt this Period  
**25.00**

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

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

**2725.00**

**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 28 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. THOMAS HUDGINS</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2014	
Mailing Address 1865 BUGLE LN		<b>Transaction ID : SA11AI.94541</b>	
City CLEARWATER	State FL	Zip Code 33764	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer LAKEVIEW BAPTIST CHURCH	Occupation ASSOCIATE PASTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		

Full Name (Last, First, Middle Initial) <b>B. THOMAS HUDGINS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 1865 BUGLE LN		<b>Transaction ID : SA11AI.94850</b>	
City CLEARWATER	State FL	Zip Code 33764	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer LAKEVIEW BAPTIST CHURCH	Occupation ASSOCIATE PASTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>C. DAVID N HUGHES</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 358 APPLE RIDGE RD.		<b>Transaction ID : SA11AI.94857</b>	
City SALEM	State OH	Zip Code 44460	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer SPECIALTY FAB	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS M. HUMPHRIES**

Mailing Address 87 NAVAJO TRAIL

City State Zip Code  
GIRARD OH 44420

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

Name of Employer Occupation  
YOUNGSTOWN WARREN REGIONAL CHAMBER OF COMMERCE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94768**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 71462 CHINI ORCHARD RD.

City State Zip Code  
FLUSHING OH 43977

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

Name of Employer Occupation  
INTERIM HEALTHCARE OF SE OH CO-OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94722**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 375 ASHTON LN

City State Zip Code  
LOWELL OH 45744

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

Name of Employer Occupation  
JAMES ENGINEERING INC ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94503**

Amount of Each Receipt this Period  
2600.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM R. JAMES**

Mailing Address 217 W CAPITOL ST. SUITE 201

City JACKSON	State MS	Zip Code 39201
-----------------	-------------	-------------------

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

Name of Employer PRUET OIL CO., LLC	Occupation OIL & GAS EXPLORATION & PRODUCTION
--	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.94605**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 330 RD BUD RD

City CHILLICOTHE	State OH	Zip Code 45601
---------------------	-------------	-------------------

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

Name of Employer TRI-STATE BUILDING TRADES UNION	Occupation BUSINESS MANAGER
---	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94606**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3509 STATE ROUTE 39 NW

City DOVER	State OH	Zip Code 44622
---------------	-------------	-------------------

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

Name of Employer KIMBLE COMPANIES	Occupation EXECUTIVE
--------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : SA11AI.94934**

Amount of Each Receipt this Period  
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**LINDA KIRALY**

Mailing Address 10 TIMBER RUN DR

City State Zip Code  
CANFIELD OH 44406

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

Name of Employer Occupation  
NORTHWOOD REALTY REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11AI.94735**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1716 FONTENAY PL.

City State Zip Code  
WILMINGTON NC 28405

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

Name of Employer Occupation  
WENDEL AUGUST FORGE EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94645**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 210 COBBLE POND RD

City State Zip Code  
ZANESVILLE OH 43701

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

Name of Employer Occupation  
DAVID R. HILL, INC. DRILLING SUPERVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94398**

Amount of Each Receipt this Period  
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 13150 WATERFORD RD

City WATERFORD State OH Zip Code 45786

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
335.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11AI.94530**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 135 MORRIS LOOP RD

City MARIETTA State OH Zip Code 45750

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

Name of Employer GREENLEAF LANDSCAPES, INC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
698.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94767**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 405 WATERTOWN RD

City WATERFORD State OH Zip Code 45786

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

Name of Employer LANG MASONRY CONTRACTORS Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.94762**

Amount of Each Receipt this Period  
1000.00

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

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

1700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1655 WATERTOWN RD.

City WATERFORD	State OH	Zip Code 45786
-------------------	-------------	-------------------

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

Name of Employer MARK LANG CONSTRUCTION	Occupation OWNER
--	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.94772**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**NORMAN F LENT III**

Mailing Address 3529 MALVERN CT.

City ALEXANDRIA	State VA	Zip Code 22304
--------------------	-------------	-------------------

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

Name of Employer ARENT FOX	Occupation EXECUTIVE
-------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.94793**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 8031 EAST MARKET STREET

City WARREN	State OH	Zip Code 44484
----------------	-------------	-------------------

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

Name of Employer LEWIS DEVELOPMENT CORP	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94634**

Amount of Each Receipt this Period  
300.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 5008 LOCKWOOD

City State Zip Code  
WACO TX 76710

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

Name of Employer Occupation  
OLD CASTLE MATERIALS GOVERNMENT AFFAIRS & MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11AI.94467**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2190 O'LINN RD

City State Zip Code  
MARIETTA OH 45750

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

Name of Employer Occupation  
DECKER DRILLING TRUCK DRIVER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : SA11AI.94422**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5633 S SALEM WARREN RD

City State Zip Code  
NORTH JACKSON OH 44451

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

Name of Employer Occupation  
LYDEN OIL COMPANY EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94636**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH R MAAS**

Mailing Address 200 SALES DR

City HARRISON State OH Zip Code 45030

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

Name of Employer J.T.M. FOOD GROUP Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2014

**Transaction ID : SA11AI.94215**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO BOX 567

City NORTH LIMA State OH Zip Code 44452

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

Name of Employer VALLEY FORGE INC Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94643**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 3881 LEETONIA RD

City LEETONIA State OH Zip Code 44431

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

Name of Employer M & M INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94818**

Amount of Each Receipt this Period  
 2600.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. ALICE MARTIG</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 10702 STATE ROUTE 534		<b>Transaction ID : SA11AI.94408</b>
City BELOIT	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF	Occupation FARMER	Election Cycle-to-Date 550.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. CHARLES MASTERS</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 2252 HESTON DR		<b>Transaction ID : SA11AI.94638</b>
City LAKE MILTON	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer OHIO VALLEY ENERGY	Occupation ACCOUNTANT	Election Cycle-to-Date 1800.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. WALTER GOLDSTON MAYFIELD</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1819 ST/ JAMES PLACE		<b>Transaction ID : SA11AI.94591</b>
City HOUSTON	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer GOLDSTON OIL CORPORATION	Occupation PRESIDENT	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<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: (check only one)	PAGE 37 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES MCBANE**

Mailing Address **PO BOX 340**

City **BERGHOLZ** State **OH** Zip Code **43908**

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

Name of Employer **MCBANE INSURANCE** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : SA11AI.94464**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **217 PEBBLE DR**

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

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

Name of Employer **MCCARTHY REAL ESTATE, INC** Occupation **REALTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11AI.94819**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **5647 CANDLEWOOD DRIVE**

City **HOUSTON** State **TX** Zip Code **77056**

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

Name of Employer **FLAT ROCK RESOURCES** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : SA11AI.94380**

Amount of Each Receipt this Period  
**1600.00**

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

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

**2350.00**

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.94464

CHECK WAS RECEIVED ON 5/7/2014 BUT WAS POSTMARKED ON 5/5/2014, THEREFORE IT IS BEING DESIGNATED FOR THE PRIMARY 2014 ELECTION

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM MCCARTNEY**

Mailing Address 5647 CANDLEWOOD DRIVE

City HOUSTON State TX Zip Code 77056

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

Name of Employer: FLAT ROCK RESOURCES Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 13 / 2014

**Transaction ID : SA11AI.94843**

Amount of Each Receipt this Period: 2600.00

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

Mailing Address 504 RUDMAN RD.

City TYLER State TX Zip Code 75701

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

Name of Employer: MEWBOURNE OIL COMPANY Occupation: INDEPENDENT OIL & GAS PRODUCER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 06 / 13 / 2014

**Transaction ID : SA11AI.94603**

Amount of Each Receipt this Period: 2600.00

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

Mailing Address 832 BEARS DEN RD

City YOUNGSTOWN State OH Zip Code 44511

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 06 / 16 / 2014

**Transaction ID : SA11AI.94641**

Amount of Each Receipt this Period: 100.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1364 MEADOWOOD CIRCLE

City POLAND State OH Zip Code 44514

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.94647**

Amount of Each Receipt this Period  
300.00

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

Mailing Address PO BOX 250

City RENO State OH Zip Code 45773

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

Name of Employer **MONDO POLYMER TECHNOLOGIES** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.94759**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 417 QUACKENBOS STREET, NW

City WASHINGTON State DC Zip Code 20011

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94860**

Amount of Each Receipt this Period  
500.00

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

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

1800.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. JOHN S MOORE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 20 / 2014	
Mailing Address 241 S 6TH ST		<b>Transaction ID : SA11AI.94418</b>	
City BYESVILLE	State OH	Zip Code 43723	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer MOORE BROS HARDWARE	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. JOHN L NAU III</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address P.O. BOX 130130		<b>Transaction ID : SA11AI.94792</b>	
City HOUSTON	State TX	Zip Code 77219	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SILVER EAGLE DISTRIBUTORS	Occupation CEO & PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) <b>C. HENRY NEMENZ</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 8518 TWIN OAKS CT		<b>Transaction ID : SA11AI.94640</b>	
City POLAND	State OH	Zip Code 44514	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HP NEMENZ FOOD INC.	Occupation RETAIL FOOD		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 3050.00
<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: (check only one)	PAGE 42 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>GARY LEE NEVILLE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 1064 FAIRFIELD SCHOOL RD		<b>Transaction ID : SA11AI.94628</b>
City COLUMBIANA	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer D. W. DICKEY & SON, INC.	Occupation EXECUTIVE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>GREGORY NEW</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 14280 S MAIN ST		<b>Transaction ID : SA11AI.94368</b>
City BELOIT	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer DP OPERATING COMPANY	Occupation EXECUTIVE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>GREGORY NEW</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 14280 S MAIN ST		<b>Transaction ID : SA11AI.94369</b>
City BELOIT	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -100.00
Name of Employer DP OPERATING COMPANY	Occupation EXECUTIVE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	<b>[MEMO ITEM]</b> REATTRIBUTED TO NEW, FRANCINE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<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: (check only one)	PAGE 43 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FRANCINE A NEW**

Mailing Address 14280 S MAIN ST

City State Zip Code  
BELOIT OH 44609

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 26 / 2014

**Transaction ID : SA11AI.94370**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
REATTRIBUTED FROM NEW, GREGORY

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

Mailing Address 1200 N 11TH ST.

City State Zip Code  
CAMBRIDGE OH 43725

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

Name of Employer Occupation  
NICOLAZAKES TRUCKING OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 24 / 2014

**Transaction ID : SA11AI.94365**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 419 FIFTH ST

City State Zip Code  
MARIETTA OH 45750

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

Name of Employer Occupation  
SELF DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2014

**Transaction ID : SA11AI.94629**

Amount of Each Receipt this Period  
200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD ORT**

Mailing Address 25 HUNTERS WOODS BLVD, APT B

City State Zip Code  
CANFIELD OH 44406

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

Name of Employer Occupation  
SELF FURNITURE MAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : SA11AI.94424**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1 CRICKET HILL

City State Zip Code  
NEWCOMERSTOWN OH 43832

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

Name of Employer Occupation  
SELF PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 25 / 2014

**Transaction ID : SA11AI.94932**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1385 MANOR DR

City State Zip Code  
SALEM OH 44460

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

Name of Employer Occupation  
MANOR LEASING RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11AI.94522**

Amount of Each Receipt this Period  
100.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 45 OF 152  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address **1401 N 13TH STREET**

City **CAMBRIDGE** State **OH** Zip Code **43725**

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

Name of Employer **PARNELL AND ASSOCIATES, INC** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : SA11AI.94746**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **299 S. MAIN ST.**

City **MANSFIELD** State **PA** Zip Code **16933**

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

Name of Employer **PETTA ENTERPRISES** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500.00**

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

**Transaction ID : SA11AI.94456**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **3565 WATERTOWN RD**

City **WATERFORD** State **OH** Zip Code **45786**

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

Name of Employer **AEP** Occupation **FIELD REP**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : SA11AI.94758**

Amount of Each Receipt this Period  
**150.00**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**RICK READ**

Mailing Address 11365 NORWICH DR.

City State Zip Code  
NEW CONCORD OH 43762

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

Name of Employer Occupation  
ENERGY SERVICES CORP OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : SA11AI.94366**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 402 SHADYWOOD RD.

City State Zip Code  
HOUSTON TX 77057

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

Name of Employer Occupation  
OASIS PETROLEUM PRESIDENT & COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.94604**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 1742 ROCK HILL LANE

City State Zip Code  
AKRON OH 44313

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

Name of Employer Occupation  
REUTHER MOLD & MFG CO RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94630**

Amount of Each Receipt this Period  
1000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD KENNETH RICE**

Mailing Address 2077 LINDA FLORA DRIVE

City State Zip Code  
LOS ANGELES CA 90077

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

Name of Employer Occupation  
SELF ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : SA11AI.94431**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 2077 LINDA FLORA DRIVE

City State Zip Code  
LOS ANGELES CA 90077

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

Name of Employer Occupation  
SELF ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : SA11AI.94432**

Amount of Each Receipt this Period  
-2400.00

**[MEMO ITEM]  
REDESIGNATED TO G-2014**

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

Mailing Address 2077 LINDA FLORA DRIVE

City State Zip Code  
LOS ANGELES CA 90077

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

Name of Employer Occupation  
SELF ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : SA11AI.94433**

Amount of Each Receipt this Period  
2400.00

**[MEMO ITEM]  
REDESIGNATED FROM P-2014**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD KENNETH RICE**

Mailing Address 2077 LINDA FLORA DRIVE

City LOS ANGELES State CA Zip Code 90077

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.94764**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4353 OGLEBAY DR

City WHEELING State WV Zip Code 26003

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

Name of Employer PRODUCERS SERVICE CORP Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94510**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 36829 TOWNSHIP HIGHWAY 2067

City JERUSALEM State OH Zip Code 43747

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

Name of Employer PROFIT ENERGY COMPANY INC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94400**

Amount of Each Receipt this Period  
500.00

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

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

1500.00



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

Form/Schedule: SA11AI

Transaction ID : SA11AI.94764

REFUNDED EXCESSIVE CONTRIBUTION OF \$300 ON 7/7/2014

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**GARY BLAKE ROUSH**

Mailing Address 403 LAWTON RD

City MARIETTA State OH Zip Code 45750

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

Name of Employer PDC ENERGY Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : SA11AI.94401**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 821 OLD WOODS RD

City COLUMBUS State OH Zip Code 43235

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

Name of Employer VORYS SATER SEYMOUR AND PEASE LLP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94507**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 89 TIMBER RUN

City CANFIELD State OH Zip Code 44406

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

Name of Employer NOAH PARTNERS Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : SA11AI.94518**

Amount of Each Receipt this Period  
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DONN SALVOSA**

Mailing Address 9911 OAK BRANCH DR.

City VIENNA	State VA	Zip Code 22181
----------------	-------------	-------------------

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

Name of Employer SELF	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94862**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 427 4TH ST

City MARIETTA	State OH	Zip Code 45750
------------------	-------------	-------------------

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

Name of Employer SCHWENDEMAN AGENCY	Occupation INSURANCE AGENT
--	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.94863**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1918 WENDOVER RD

City CHARLOTTE	State NC	Zip Code 28211
-------------------	-------------	-------------------

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

Name of Employer SCOTT REALTY ADVISORS, INC.	Occupation OWNER
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94500**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**HOWARD SEEDS**

Mailing Address 1170 SHARROTT CREEK DRIVE

City NORTH LIMA State OH Zip Code 44452

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94724**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1325 13TH STREET NW

City WASHINGTON State DC Zip Code 20005

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

Name of Employer PECK MADIGAN JONES Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94847**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4030 FAIRWAY DR

City CANFIELD State OH Zip Code 44406

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

Name of Employer HEALTHRIDGE MEDICAL CENTER Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.94637**

Amount of Each Receipt this Period  
 300.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. B. SIEMER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2014
Mailing Address 2 BOTTOMLEY CRESCENT CT		<b>Transaction ID : SA11AI.94528</b>
City GAHANNA	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer DESCO CORPORATION	Occupation EXECUTIVE	Amount of Each Receipt this Period 7700.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. BARBARA SIEMER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2014
Mailing Address 2 BOTTOMLEY CRESCENT CT		<b>Transaction ID : SA11AI.94532</b>
City NEW ALBANY	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period 2600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. GREGORY SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 400 W RAILROAD ST		<b>Transaction ID : SA11AI.94802</b>
City COLUMBIANA	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer COMPCO METAL CO	Occupation EXECUTIVE	Amount of Each Receipt this Period 2000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.94528

REFUNDED \$2,500 EXCESSIVE PORTION OF CONTRIBUTION ON 7/7/2014

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. CLARENCE SMITH</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 8270 RAUB AVE		<b>Transaction ID : SA11AI.94809</b>	
City YOUNGSTOWN	State OH	Zip Code 44507	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer COMPCO INDUSTRIES	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. THOMAS STEWART</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 2141 WILLIAM T CIRCLE		<b>Transaction ID : SA11AI.94364</b>	
City LANCASTER	State OH	Zip Code 43130	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer OHIO OIL AND GAS ASSOCIATION	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3000.00		

Full Name (Last, First, Middle Initial) <b>C. TODD L. STONE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 20 WATERFORD LAKE		<b>Transaction ID : SA11AI.94600</b>	
City SPRING	State TX	Zip Code 77381	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer ARENA ENERGY	Occupation GEOLOGIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 4600.00
<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: (check only one)	PAGE 56 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**A. E. SZAMBECKI**

Mailing Address **PO BOX 671**

City **KENT** State **OH** Zip Code **44240**

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

Name of Employer **HALLRICH, INC** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : SA11AI.94622**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **PO BOX 671**

City **KENT** State **OH** Zip Code **44240**

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

Name of Employer **HALLRICH, INC** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : SA11AI.94851**

Amount of Each Receipt this Period  
**1600.00**

**C.** Full Name (Last, First, Middle Initial)  
**WALTER F TEER III**

Mailing Address **450 MITCHELLS LANE**

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

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

Name of Employer **STRATAGRAPH NE, INC** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : SA11AI.94501**

Amount of Each Receipt this Period  
**500.00**

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

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

**3100.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**SARAH TIPKA**

Mailing Address 1366 TERRACE RD NW

City State Zip Code  
NEW PHILADELPHIA OH 44663

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

Name of Employer Occupation  
A W TIPKA OIL & GAS INC LAND MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1975.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : SA11AI.94420**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1336 TERRACE RD NW

City State Zip Code  
NEW PHILADELPHIA OH 44663

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

Name of Employer Occupation  
AW TIPKA OIL & GAS INC EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.94721**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 108 ASHTON DR.

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
MAGNUM HUNTER SENIOR VP EQUIPMENT SERVICES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.94506**

Amount of Each Receipt this Period  
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CLAUDIA BARKER VALENTE**

Mailing Address 7055 LEESTONE STREET

City Springfield State VA Zip Code 22151

FEC ID number of contributing federal political committee. C

Name of Employer FINANCIAL WEST GROUP Occupation CEO SECURITIES DEALER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : SA11AI.94521**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**ALBERT WILLI VONTZ III**

Mailing Address 2590 GRANDIN RD.

City CINCINNATI State OH Zip Code 45208

FEC ID number of contributing federal political committee. C

Name of Employer HEIDELBERG DISTRIBUTING COMPANY Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : SA11AI.94428**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1100 LOUISIANA, SUITE 320

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. C

Name of Employer WALTER OIL & GAS CORPORATION Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.94589**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00

**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 59 OF 152
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DARREN WILLCOX**

Mailing Address 9696 MILL RIDGE LANE

City State Zip Code  
GREAT FALLS VA 22066

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

Name of Employer Occupation  
W STRATEGIES CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2014

**Transaction ID : SA11AI.94848**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**FRANK C WOODSIDE MD**

Mailing Address 205 ELM AVE.

City State Zip Code  
WYOMING OH 45215

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

Name of Employer Occupation  
DINSMORE AND SHOHL, LLP ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : SA11AI.94425**

Amount of Each Receipt this Period  
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

750.00

112475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ADVANCED MEDICAL TECHNOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **701 PENNSYLVANIA AVE. NW**  
**SUITE 800**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00340356**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : SA11C.94475**

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

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

Mailing Address **WORLDWIDE HEADQUARTERS**  
**1932 WYNNTON ROAD**

City **COLUMBUS** State **GA** Zip Code **31999**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : SA11C.94486**

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

**C.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address **1625 MASSACHUSETTS AVE. NW**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00035451**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **5000.00**

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

**Transaction ID : SA11C.94445**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1500.00**

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

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

\_\_\_\_\_ **3500.00**

\_\_\_\_\_

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

Form/Schedule: SA11C

Transaction ID : SA11C.94475

CHECK WAS RECEIVED ON 5/8/2014 BUT WAS POSTMARKED ON 5/6/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 421 AVIATION WAY

City State Zip Code  
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4000.00

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

**Transaction ID : SA11C.94436**

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
**AK STEEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 9227 CENTRE POINTE DRIVE

City State Zip Code  
WEST CHESTER OH 45069

FEC ID number of contributing federal political committee. **C** C00290973

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11C.94384**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ALPHA NATURAL RESOURCES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1301 PENNSYLVANIA AVE., NW  
SUITE 404

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00348524

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11C.94372**

Amount of Each Receipt this Period  
2000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 SOUTH PROSPECT AVE  
C/O FINANCE DEPARTMENT

City State Zip Code  
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2014

**Transaction ID : SA11C.94610**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 12846

City State Zip Code  
AUSTIN TX 78711

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11C.94484**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)

Mailing Address ONE PARKWAY CENTER, SUITE 212

City State Zip Code  
PITTSBURGH PA 15220

FEC ID number of contributing federal political committee. **C** C00364109

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2014

**Transaction ID : SA11C.94609**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN CABLE ASSOCIATION INC PAC (ACA PAC)**

Mailing Address **ONE PARKWAY CENTER, SUITE 212**

City **PITTSBURGH** State **PA** Zip Code **15220**

FEC ID number of contributing federal political committee. **C C00364109**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : SA11C.94795**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **2400 N ST NW**

City **WASHINGTON** State **DC** Zip Code **20037**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : SA11C.94799**

Amount of Each Receipt this Period  
**1000.00**

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

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

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : SA11C.94797**

Amount of Each Receipt this Period  
**2500.00**

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

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

**4500.00**



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

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

FOR LINE NUMBER: PAGE 65 OF 152

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**JOHNSON FOR CONGRESS**

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

Mailing Address 400 N. CAPITOL ST., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 23 / 2014

**Transaction ID : SA11C.94497**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 19 / 2014

**Transaction ID : SA11C.94611**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11C.94440**

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<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: (check only one)	PAGE 66 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94441**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2215 CONSTITUTION AVENUE, NW

City WASHINGTON State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00193854

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94822**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11C.94439**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN PRINCIPLES**

Mailing Address 20533 BISCAYNE BLVD  
#250

City MIAMI State FL Zip Code 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.94442**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF HEALTH-SYSTEM PHARMACISTS POLITICAL ACTION COMMITTEE (ASHP-PAC)**

Mailing Address 7272 WISCONSIN AVENUE

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00245530

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : SA11C.94387**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOYBEAN ASSOCIATION PAC (SOYPAC)**

Mailing Address 12125 WOODCREST EXECUTIVE DRIVE  
SUITE 100

City ST LOUIS State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C** C00408468

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11C.94496**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City CHESTERBROOK State PA Zip Code 19355

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94479**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
ASSOCIATED BUILDERS & CONTRACTORS PAC

Mailing Address 4250 NORTH FAIRFAX DRIVE  
9TH FLOOR

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C.94612**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL PAC

Mailing Address 208 S AKARD STREET

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : SA11C.94482**

Amount of Each Receipt this Period  
4000.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 152
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AUSTIN SCOTT FOR CONGRESS, INC.**

Mailing Address PO BOX 2530

City TIFTON State GA Zip Code 31793

FEC ID number of contributing federal political committee. **C** C00482737

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 13 / 2014

**Transaction ID : SA11C.94602**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)**

Mailing Address 1101 WILSON BLVD.

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11C.94465**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**BAYER CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 100 BAYER ROAD

City PITTSBURGH State PA Zip Code 15205

FEC ID number of contributing federal political committee. **C** C00281162

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11C.94483**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 70 OF 152  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

Full Name (Last, First, Middle Initial)  
BUCHANAN INGERSOLL & ROONEY PC COMMITTEE FOR EFFECTIVE GOVERNMENT 'BIRPC PAC'

A. Mailing Address ONE OXFORD CENTRE, MILES H. SIMON  
301 GRANT STREET 20TH FLOOR  
City State Zip Code  
PITTSBURGH PA 15219

Date of Receipt  

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

Transaction ID : SA11C.94386

FEC ID number of contributing federal political committee. **C** C00195388

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)  
CANFIELD REPUBLICAN WOMEN'S CLUB - MAHONING COUNTY PAC

B. Mailing Address 260 DARTMOUTH DRIVE  
City State Zip Code  
CANFIELD OH 44406

Date of Receipt  

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

Transaction ID : SA11C.94513

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

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)  
CENTURYLINK INC. EMPLOYEES POLITICAL ACTION COMMITTEE

C. Mailing Address 1099 NEW YORK AVENUE NW  
SUITE 250  
City State Zip Code  
WASHINGTON DC 20001

Date of Receipt  

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

Transaction ID : SA11C.94794

FEC ID number of contributing federal political committee. **C** C00419911

Amount of Each Receipt this Period  

1	0	0	0	0	0	0	0	0	0

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  

1	0	0	0	0	0	0	0	0	0

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

3000.00

**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 71 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CHENIERE ENERGY, INC. PAC**

Mailing Address 1445 PENNSYLVANIA AVENUE, NW  
SUITE 550

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00430157**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94469**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**COALPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 500 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00109819**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94466**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11C.94789**

Amount of Each Receipt this Period  
3500.00

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

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

6500.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94469

CHECK WAS RECEIVED ON 5/7/2014, BUT WAS POSTMARKED 5/5/2014. THEREFORE IT IS BEING DESIGNATED FOR PRIMARY 2014

Form/Schedule:

Transaction ID:



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>CONSUMER HEALTHCARE PRODUCTS ASSOCIATION PAC (CHPA/PAC)</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 900 19TH STREET, NW SUITE 700		<b>Transaction ID : SA11C.94616</b>	
City WASHINGTON State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00040584</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3077.06		

Full Name (Last, First, Middle Initial) <b>CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 1400 16TH STREET NW SUITE 600		<b>Transaction ID : SA11C.94614</b>	
City WASHINGTON State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00262295</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>CVS/CAREMARK CORPORATION EMPLOYEES PAC</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address 1300 EYE STREET, NW SUITE 525W		<b>Transaction ID : SA11C.94374</b>	
City WASHINGTON State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00384818</b>	Name of Employer Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<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: (check only one)	PAGE 74 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)  
**DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA PIPER PAC)**

Mailing Address **500 8TH STREET, NW**  
  
City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00151340**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 13 / 2014**

**Transaction ID : SA11C.94592**

Amount of Each Receipt this Period  
**750.00**

B. Full Name (Last, First, Middle Initial)  
**DOMINION RESOURCES, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC**

Mailing Address **ONE JAMES RIVER PLAZA, 20TH FLOOR  
P.O. BOX 26666**  
  
City **RICHMOND** State **VA** Zip Code **23261**

FEC ID number of contributing federal political committee. **C C00108209**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : SA11C.94389**

Amount of Each Receipt this Period  
**1500.00**

C. Full Name (Last, First, Middle Initial)  
**DOMINION RESOURCES, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC**

Mailing Address **ONE JAMES RIVER PLAZA, 20TH FLOOR  
P.O. BOX 26666**  
  
City **RICHMOND** State **VA** Zip Code **23261**

FEC ID number of contributing federal political committee. **C C00108209**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : SA11C.94393**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3250.00</b>
<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 75 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DOMINION RESOURCES, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC**

Mailing Address **ONE JAMES RIVER PLAZA, 20TH FLOOR**  
**P.O. BOX 26666**

City **RICHMOND** State **VA** Zip Code **23261**

FEC ID number of contributing federal political committee. **C C00108209**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : SA11C.94800**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **ONE ENERGY PLAZA**  
**ROOM 1583 WCB**

City **DETROIT** State **MI** Zip Code **48226**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11C.94829**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address **550 SOUTH TRYON STREET**

City **CHARLOTTE** State **NC** Zip Code **28202**

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : SA11C.94493**

Amount of Each Receipt this Period  
**2000.00**

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

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

**5000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address 3 BETHESDA METRO CENTER  
SUITE 1100

City State Zip Code  
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94801**

Amount of Each Receipt this Period  
2500.00

**B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

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

**Transaction ID : SA11C.94438**

Amount of Each Receipt this Period  
2500.00

**C. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS**

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

Mailing Address 1125 17TH ST, NW

City State Zip Code  
WASHINGTON DC 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : SA11C.94429**

Amount of Each Receipt this Period  
2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ENTRUST INC POLITICAL ACTION COMMITTEE**

Mailing Address 16633 DALLAS PARKWAY  
SUITE 800

City ADDISON State TX Zip Code 75001

FEC ID number of contributing federal political committee. **C C00373787**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : SA11C.94495**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94821**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address ONE EXPRESS WAY

City ST. LOUIS State MO Zip Code 63121

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94593**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE**

Mailing Address **PO BOX 2485**

City **SPRINGFIELD** State **VA** Zip Code **22152**

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11C.94828**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**F.N.B. CORPORATION PAC**

Mailing Address **ONE F N B BLVD**

City **HERMITAGE** State **PA** Zip Code **16148**

FEC ID number of contributing federal political committee. **C C00514026**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11C.94803**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **1299 PENNSYLVANIA AVE NW STE 800**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00502906**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : SA11C.94615**

Amount of Each Receipt this Period  
**1500.00**

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

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

**2200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 76 SOUTH MAIN STREET

City State Zip Code  
AKRON OH 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11C.94788**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6700 LAS COLINAS BOULEVARD

City State Zip Code  
IRVING TX 75039

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.94485**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF PORK, OHIO PORK PRODUCERS PAC**

Mailing Address 5930 SHARON WOODS BLVD.  
SUITE 101

City State Zip Code  
COLUMBUS OH 43229

FEC ID number of contributing federal political committee. **C** C00420497

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11C.94379**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11C.94489**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94594**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
GENERIC PHARMACEUTICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 777 6TH STREET, NW  
SUITE 510

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00383463

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C.94618**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : SA11C.94490**

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.94488**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PIZZA HUT FRANCHISE HOLDERS ASSOC PAC**

Mailing Address 7829 EAST ROCKHILL  
SUITE 281

City WICHITA State KS Zip Code 67206

FEC ID number of contributing federal political committee. **C** C00251447

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11C.94621**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**JPMORGAN CHASE & CO. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **601 PENNSYLVANIA AVENUE, NW  
7TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00104299**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : SA11C.94478**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**KEEPING REPUBLICAN IDEAS STRONG TIMELY AND INVENTIVE (KRISTI PAC)**

Mailing Address **PO BOX 312**

City **SIOUX FALLS** State **SD** Zip Code **57101**

FEC ID number of contributing federal political committee. **C C00493809**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 13 / 2014**

**Transaction ID : SA11C.94595**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE**

Mailing Address **3050 K STREET NW SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20007**

FEC ID number of contributing federal political committee. **C C00301929**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : SA11C.94388**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3000.00**

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

Form/Schedule: SA11C

Transaction ID : SA11C.94478

CHECK WAS RECEIVED ON 5/8/2014, BUT WAS POSTMARKED ON 5/6/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : SA11C.94480**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : SA11C.94491**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11C.94783**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<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: (check only one)	PAGE 85 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MAKING AMERICA PROSPEROUS PAC**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00445379

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94601**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**MOLINA HEALTHCARE, INC. PAC**

Mailing Address 200 OCEANGATE SUITE 100

City Long Beach State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C.94619**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94472**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94472

CHECK WAS RECEIVED ON 5/7/2014 BUT WAS POSTMARKED ON 5/5/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94473**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : SA11C.94394**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1776 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94596**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94473

CHECK WAS RECEIVED 5/7/2014 BUT WAS POSTMARKED ON 5/5/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014.

Form/Schedule:

Transaction ID:



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94447**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11C.94378**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

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

**Transaction ID : SA11C.94544**

Amount of Each Receipt this Period  
 2000.00

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

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

6000.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94447

THIS ITEM WAS RECEIVED ON 5/7, BUT WAS POSTMARKED ON 5/5/2014 AND WAS DESIGNATED PRIMARY 2014

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 91 OF 152  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC**

Mailing Address 3601 VINCENNES ROAD  
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268

FEC ID number of contributing federal political committee. **C C00170258**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94598**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C70002563**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11C.94623**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00030809**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94446**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94446

ITEM WAS RECEIVED ON 5/7/2014, BUT WAS POSTMARKED ON 5/5/2014 AND WAS DESIGNATED FOR PRIMARY 2014 ELECTION.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Mailing Address 20 F STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00376343**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94590**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11C.94785**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL OCEAN INDUSTRIES ASSOCIATION (NOIA) POLITICAL ACTIO**

Mailing Address 1120 G STREET NW  
SUITE 900

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00409565**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94826**

Amount of Each Receipt this Period  
2000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1630 DUKE STREET**  
**2ND FLOOR**

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

FEC ID number of contributing federal political committee. **C C00072025**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : SA11C.94476**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **51 MADISON AVENUE**  
**ROOM 1109**

City **NEW YORK** State **NY** Zip Code **10010**

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : SA11C.94784**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address **200 CIVIC CENTER DRIVE**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : SA11C.94391**

Amount of Each Receipt this Period  
 2500.00

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

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

8500.00

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

Form/Schedule: SA11C

Transaction ID : SA11C.94476

CHECK WAS RECEIVED ON 5/8/2014 BUT WAS POSTMARKED ON 5/6/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 96 OF 152  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**NISOURCE INC. PAC**

Mailing Address **200 CIVIC CENTER DRIVE**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**9500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 / 02 / 2014**

**Transaction ID : SA11C.94487**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address **ONE CONSTITUTION AVE NE**

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

FEC ID number of contributing federal political committee. **C C00009282**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**05 / 03 / 2014**

**Transaction ID : SA11C.94430**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**

Mailing Address **1155 F STREET NW  
SUITE 1150**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : SA11C.94543**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F ST NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11C.94786**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**NUCOR CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1915 REXFORD ROAD

City CHARLOTTE State NC Zip Code 28211

FEC ID number of contributing federal political committee. **C C00379628**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : SA11C.94385**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**OHIO CORN AND WHEAT GROWERS ASSOCIATION PAC**

Mailing Address 59 GREIF PARKWAY SUITE 101

City DELAWARE State OH Zip Code 43015

FEC ID number of contributing federal political committee. **C C00494237**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : SA11C.94474**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**OHIO FARM BUREAU FEDERATION AGRICULTURE FOR GOOD GOVERNMENT**

Mailing Address **PO BOX 182383**

City **COLUMBUS** State **OH** Zip Code **43218**

FEC ID number of contributing federal political committee. **C C00161265**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 26 / 2014**

**Transaction ID : SA11C.94371**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **1015 15TH ST NW SUITE 200**

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

FEC ID number of contributing federal political committee. **C C00323048**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3130.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : SA11C.94550**

Amount of Each Receipt this Period  
**140.00**

**IN-KIND: FUNDRAISING VENUE**

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

Mailing Address **1015 15TH ST NW SUITE 200**

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

FEC ID number of contributing federal political committee. **C C00323048**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4130.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : SA11C.94481**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3640.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**POET PAC**

Mailing Address **4615 N LEWIS AVE**

City **SIOUX FALLS** State **SD** Zip Code **57104**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11C.94824**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**

Mailing Address **317 MASSACHUSETTS AVENUE, NE  
1ST FLOOR**

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

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11C.94545**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**POLYONE CORP. POLITICAL ACTION COMMITTEE**

Mailing Address **33587 WALKER ROAD**

City **AVON LAKE** State **OH** Zip Code **44012**

FEC ID number of contributing federal political committee. **C C00288712**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : SA11C.94383**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVENUE N W

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : SA11C.94791**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVERNMENT**

Mailing Address TWO NORTH NINTH STREET  
GENTW2

City State Zip Code  
ALLENTOWN PA 18101

FEC ID number of contributing federal political committee. **C** C00228106

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.94820**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 1301 K STREET, NW  
SUITE 800W

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11C.94435**

Amount of Each Receipt this Period  
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code  
CINCINNATI OH 45244

FEC ID number of contributing federal political committee. **C** C00440032

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94462**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code  
CINCINNATI OH 45244

FEC ID number of contributing federal political committee. **C** C00440032

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94463**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City State Zip Code  
WASHINGTON DC 20007

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11C.94492**

Amount of Each Receipt this Period  
1000.00

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

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

11000.00

**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 102 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00165159**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11C.94787**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
RETAIL INDUSTRY LEADERS ASSOCIATION POLITICAL ACTION COMMITTEE AKA RETAIL LEADERS PAC

Mailing Address 1700 N. MOORE STREET  
SUITE 2250

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00112763**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : SA11C.94390**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 30 HUNTER LANE

City CAMP HILL State PA Zip Code 17011

FEC ID number of contributing federal political committee. **C C00104083**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11C.94548**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City State Zip Code  
JEFFERSON LA 70183

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94827**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**SEMPRA ENERGY EMPLOYEES POLITICAL ACTION COMMITTEE- FEDERAL**

Mailing Address 101 ASH STREET, HQ08C

City State Zip Code  
SAN DIEGO CA 92101

FEC ID number of contributing federal political committee. **C** C00008748

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11C.94373**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 300 NEW JERSEY AVENUE, NW  
SUITE 1000

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : SA11C.94392**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
SOUTHERN COMPANY - SOUTHERN NUCLEAR OPERATING COMPANY, INC. PAC

Mailing Address 42 INVERNESS CENTER

City BIRMINGHAM State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C** C00250407

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94471**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10111

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11C.94470**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
SPECTRA ENERGY CORP POLITICAL ACTION COMMITTEE (SPECTRA-DCP PAC)

Mailing Address 5400 WESTHEIMER COURT

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C** C00429662

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

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

**Transaction ID : SA11C.94443**

Amount of Each Receipt this Period  
 2500.00

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

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

5000.00



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

Form/Schedule: SA11C

Transaction ID : SA11C.94471

CHECK WAS RECEIVED ON 5/7/2014, BUT WAS POSTMARKED ON 5/5/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014.

Form/Schedule: SA11C

Transaction ID: SA11C.94470

CHECK WAS RECEIVED ON 5/7/2014, BUT WAS POSTMARKED ON 5/5/2014. THEREFORE IT IS BEING REPORTED FOR PRIMARY 2014

**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 106 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2014
Mailing Address PO BOX 905		<b>Transaction ID : SA11C.94943</b>
City State Zip Code NEWTON NJ 07860	Amount of Each Receipt this Period 650.00 IN-KIND:FUNDRAISING EXPENSES	
FEC ID number of contributing federal political committee. C C00453324	Name of Employer Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 998.75	

Full Name (Last, First, Middle Initial) <b>SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2014
Mailing Address PO BOX 905		<b>Transaction ID : SA11C.94945</b>
City State Zip Code NEWTON NJ 07860	Amount of Each Receipt this Period 348.75 IN-KIND: CATERING EXPENSES	
FEC ID number of contributing federal political committee. C C00453324	Name of Employer Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 998.75	

Full Name (Last, First, Middle Initial) <b>THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2014
Mailing Address 1155 F STREET, NW SUITE 400		<b>Transaction ID : SA11C.94437</b>
City State Zip Code WASHINGTON DC 20004	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00284885	Name of Employer Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3498.75
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 107 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THE PROCTOR & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE**

Mailing Address **ONE PROCTOR & GAMBLE PLAZA**

City **CINCINNATI** State **OH** Zip Code **45202**

FEC ID number of contributing federal political committee. **C C00257329**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11C.94457**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**THERMO FISHER SCIENTIFIC INC. PAC**

Mailing Address **81 WYMAN STREET  
PO BOX 9046**

City **WALTHAM** State **MA** Zip Code **02454**

FEC ID number of contributing federal political committee. **C C00292318**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500.00**

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

**Transaction ID : SA11C.94547**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS**

Mailing Address **228 S. WASHINGTON STREET  
SUITE 115**

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

FEC ID number of contributing federal political committee. **C C00330720**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : SA11C.94790**

Amount of Each Receipt this Period  
**5000.00**

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

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

**9000.00**

**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 108 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address 209 PENNSYLVANIA AVENUE, S.E.

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.94825**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**TWENTY-FIRST CENTURY FOX, INC. PAC (FOX PAC)**

Mailing Address 444 N CAPITOL STREET - SUITE 740

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C.94617**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITED EGG ASSOCIATION EGGPAC**

Mailing Address 1720 WINDWARD CONCOURSE  
SUITE 230

City	State	Zip Code
ALPHARETTA	GA	30005

FEC ID number of contributing federal political committee. **C** C00172841

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11C.94599**

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

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

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

\_\_\_\_\_ 5000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : SA11C.94367**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : SA11C.94546**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11C.94620**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**US CELLULAR POLITICAL ACTION COMMITTEE**

Mailing Address 8410 W. BRYN MAWR

City State Zip Code  
CHICAGO IL 60631

FEC ID number of contributing federal political committee. **C** C00336057

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11C.94468**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**USEC INC. POLITICAL ACTION COMMITTEE (USEC PAC)**

Mailing Address 6903 ROCKLEDGE DRIVE

City State Zip Code  
BETHESDA MD 20817

FEC ID number of contributing federal political committee. **C** C00355719

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.94434**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address ONE VALERO WAY

City State Zip Code  
SAN ANTONIO TX 78249

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.94444**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 152
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**VSS & P FED PAC**

Mailing Address 52 EAST GAY STREET

City State Zip Code  
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00220764

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 15 / 2014

**Transaction ID : SA11C.94519**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8TH STREET

City State Zip Code  
BENTONVILLE AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.94823**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 104 WILMOT ROAD MS #1447

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11C.94477**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 152	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**YAHOO! INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE., NW  
SUITE 800 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00380535

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2014

**Transaction ID : SA11C.94798**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

208588.75



**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 113 OF 152	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>BILL JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 519 FIFTH STREET		<b>Transaction ID : SA11D.94782</b>
City MARIETTA	State OH	
FEC ID number of contributing federal political committee. C H00H06189		Amount of Each Receipt this Period 8907.94
Name of Employer US GOVERNMENT	Occupation CONGRESSMAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 13331.67	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8907.94
<b>TOTAL</b> This Period (last page this line number only).....	8907.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AUSTYN'S</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 130 FRONT ST			Amount of Each Disbursement this Period 690.90	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.94670	
Purpose of Disbursement FUNDRAISER MEALS		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. AUSTYN'S</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 130 FRONT ST			Amount of Each Disbursement this Period 690.90	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.94671	
Purpose of Disbursement FUNDRAISER MEALS		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. BELTWAY CATERING DBA BON VIVANT CATERING</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address 1251 PINE HILL RD.			Amount of Each Disbursement this Period 1232.00	
City MCLEAN	State VA	Zip Code 22101	Transaction ID : SB17.94570	
Purpose of Disbursement FUNDRAISING EVENT MEALS		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2613.80
<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 115 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. MARLENE F BRICK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address P.O. BOX 177		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : SB17.94376</b>
City PORT WASHINGTON	State OH	
Zip Code 43837	Purpose of Disbursement IN-KIND:	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 300 FIRST ST, SE		Amount of Each Disbursement this Period 88.00 <b>Transaction ID : SB17.94676</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN MEALS	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 300 FIRST ST, SE		Amount of Each Disbursement this Period 44.13 <b>Transaction ID : SB17.94900</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN MEALS	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	357.13
<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 116 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. COMMUNICATIONS COUNSEL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2014
Mailing Address 37 WEST BROAD STREET, SUITE 325		Amount of Each Disbursement this Period 61920.27 <b>Transaction ID : SB17.94913</b>
City State Zip Code COLUMBUS OH 43215	Purpose of Disbursement MEDIA CONSULTANT: MAILINGS, WEB DESIGN, RADIO ADS, RETAINER Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DRAKES LANDING</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 2177 W. WESTERN RESERVE RD		Amount of Each Disbursement this Period 2142.75 <b>Transaction ID : SB17.94912</b>
City State Zip Code CANFIELD OH 44406	Purpose of Disbursement FUNDRAISING MEALS Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ELECTEKUSA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address P.O. BOX 23715		Amount of Each Disbursement this Period 1600.00 <b>Transaction ID : SB17.94691</b>
City State Zip Code CHAGRIN FALLS OH 44023	Purpose of Disbursement CAMPAIGN SOFTWARE FEES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	61920.27
<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 117 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ENTERPRISE RENT-A-CAR CO. OF KENTUCKY</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014	
Mailing Address 832 PIKE ST			Amount of Each Disbursement this Period 242.70	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.94910	
Purpose of Disbursement CAMPAIGN TRAVEL - CAR RENTAL		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. EPIPHANY PRODUCTIONS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014	
Mailing Address 104 HUME AVENUE			Amount of Each Disbursement this Period 5088.96	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SB17.94687	
Purpose of Disbursement CAMPAIGN FUNDRAISING CONSULTANT RETAINER		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EPIPHANY PRODUCTIONS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014	
Mailing Address 104 HUME AVENUE			Amount of Each Disbursement this Period 5130.38	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SB17.94690	
Purpose of Disbursement CAMPAIGN FUNDRAISER RETAINER		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10462.04
<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 118 OF 152			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. EXPEDIA</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014	
Mailing Address 333 108TH AVENUE NE			Amount of Each Disbursement this Period 84.59	
City BELLEVUE	State WA	Zip Code 98004	Transaction ID : SB17.94679	
Purpose of Disbursement CAMPAIGN TRAVEL - LODGING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FEDEX KINKO'S</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 1601 CRYSTAL SQUARE			Amount of Each Disbursement this Period 27.94	
City ARLINGTON	State VA	Zip Code 22202	Transaction ID : SB17.94886	
Purpose of Disbursement CAMPAIGN POSTAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FEDEX KINKO'S</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014	
Mailing Address 1601 CRYSTAL SQUARE			Amount of Each Disbursement this Period 27.81	
City ARLINGTON	State VA	Zip Code 22202	Transaction ID : SB17.94899	
Purpose of Disbursement OVERNIGHT POSTAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.34
<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 119 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. FILPAC, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 3624 LIEB ST		Amount of Each Disbursement this Period 1070.00 <b>Transaction ID : SB17.94686</b>
City COLUMBUS	State OH	
Zip Code 43214	Purpose of Disbursement CAMPAIGN MANAGEMENT SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMANDA FINN</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 748.12 <b>Transaction ID : SB17.94689</b>
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. TORTILLA COAST</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 400 FIRST STREET SE		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : SB17.94698</b> <b>[MEMO ITEM]</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CAMPAIGN TRAVEL - MEAL	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1818.10
<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 120 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 208 S AKARD		Amount of Each Disbursement this Period 660.29 <b>Transaction ID : SB17.94868</b>
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CAMPAIGN PHONE REIMBURSEMENT Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMANDA FINN</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 428 6TH STREET		Amount of Each Disbursement this Period 660.29 <b>Transaction ID : SB17.94695</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE AND TRAVEL REIMBURSEMENT Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 208 S AKARD		Amount of Each Disbursement this Period 60.02 <b>Transaction ID : SB17.94960</b>
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CAMPAIGN PHONE REIMBURSEMENT Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	660.29
<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 121 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. GIANT EAGLE #6510</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 128 GROSS ST		Amount of Each Disbursement this Period 5.54
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name		Transaction ID : SB17.94898
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. HILL COUNTRY BARBEQUE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 410 7TH STREET		Amount of Each Disbursement this Period 1705.58
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement FUNDRAISER MEALS 001 Category/Type	
Candidate Name		Transaction ID : SB17.94901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HYATT HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 71 SOUTH WACKER DRIVE 12TH FLOOR		Amount of Each Disbursement this Period 176.91
City CHICAGO State IL Zip Code 60606	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING 001 Category/Type	
Candidate Name		Transaction ID : SB17.94553
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1888.03
<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 122 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. HYDE BROTHERS PRINTING CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 357.03 <b>Transaction ID : SB17.94664</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement PRINTING - LETTERHEAD AND CARDS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HYDE BROTHERS PRINTING CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 101 RATHBONE ROAD, PO BOX 586		Amount of Each Disbursement this Period 52.66 <b>Transaction ID : SB17.94926</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN PRINTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JPMORGAN CHASE BANK, N.A.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address PO BOX 260180		Amount of Each Disbursement this Period 24.00 <b>Transaction ID : SB17.94915</b>
City BATON ROUGE State LA Zip Code 70826	Purpose of Disbursement BANK FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	433.69
<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 123 OF 152		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. MARIETTA OFFICE SUPPLY</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 41.59 <b>Transaction ID : SB17.94669</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. MARIETTA OFFICE SUPPLY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 18.85 <b>Transaction ID : SB17.94927</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MARIETTA OFFICE SUPPLY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 223 SECOND ST		Amount of Each Disbursement this Period 31.40 <b>Transaction ID : SB17.94928</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	91.84
<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 124 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 11 / 2014</b>
Mailing Address <b>320 FIRST STREET, SE</b>		Amount of Each Disbursement this Period <b>15000.00</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>CONTRIBUTION</b>	Transaction ID : <b>SB17.94692</b>
Candidate Name <b>NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. OHIO BUREAU OF WORKERS COMPENSATION</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 13 / 2014</b>
Mailing Address <b>CORPORATE PROCESSING DEPARTMENT</b>		Amount of Each Disbursement this Period <b>74.58</b>
City <b>COLUMBUS</b> State <b>OH</b> Zip Code <b>43271</b>	Purpose of Disbursement <b>CAMPAIGN STAFF WORKERS COMP TAXES</b>	Transaction ID : <b>SB17.94668</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. OHIO REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 02 / 2014</b>
Mailing Address <b>211 S FIFTH STREET</b>		Amount of Each Disbursement this Period <b>100.00</b>
City <b>COLUMBUS</b> State <b>OH</b> Zip Code <b>43215</b>	Purpose of Disbursement <b>TICKETS FOR ANNUAL DINNER</b>	Transaction ID : <b>SB17.94667</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15174.58</b>
<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 125 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ORACLE PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1015 15TH ST NW SUITE 200		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : SB17.94551</b>
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement IN-KIND: FUNDRAISING VENUE	
Candidate Name <b>ORACLE PAC</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2251.15 <b>Transaction ID : SB17.94566</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL EXPENSE	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 926.98 <b>Transaction ID : SB17.94567</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement CAMPAIGN STAFF PAYROLL TAXES	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3318.13
<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 126 OF 152			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement  
CAMPAIGN STAFF PAYROLL PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
04 / 30 / 2014

Amount of Each Disbursement this Period  
43.12

Transaction ID : SB17.94568

Category/Type  
001

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

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement  
STAFF PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 14 / 2014

Amount of Each Disbursement this Period  
2251.17

Transaction ID : SB17.94650

Category/Type  
001

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

Mailing Address 101 E HINES HILL ROAD

City HUDSON State OH Zip Code 44236

Purpose of Disbursement  
STAFF PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 15 / 2014

Amount of Each Disbursement this Period  
923.96

Transaction ID : SB17.94651

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 3218.25

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21
City HUDSON State OH Zip Code 44236	Purpose of Disbursement PAYROLL PROCESSING FEES	
Candidate Name	Category/Type 001	Transaction ID : SB17.94652
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2251.16
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL EXPENSE	
Candidate Name	Category/Type 001	Transaction ID : SB17.94653
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 921.97
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL TAXES	
Candidate Name	Category/Type 001	Transaction ID : SB17.94654
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3218.34
<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 128 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21 <b>Transaction ID : SB17.94655</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement PAYROLL PROCESSING EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2251.14 <b>Transaction ID : SB17.94916</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 414.16 <b>Transaction ID : SB17.94917</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL EXPENSE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2710.51
<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 129 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PAYCHEX</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 915.32 <b>Transaction ID : SB17.94918</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL TAXES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 147.09 <b>Transaction ID : SB17.94919</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL PROCESSING FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21 <b>Transaction ID : SB17.94923</b>
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL PROCESSING FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1107.62
<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 130 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 2665.32
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL EXPENSE	
Candidate Name	Category/Type 001	<b>Transaction ID : SB17.94920</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 1035.73
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL TAX EXPENSES	
Candidate Name	Category/Type 001	<b>Transaction ID : SB17.94921</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYCHEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 101 E HINES HILL ROAD		Amount of Each Disbursement this Period 45.21
City HUDSON State OH Zip Code 44236	Purpose of Disbursement STAFF PAYROLL PROCESSING FEES	
Candidate Name	Category/Type 001	<b>Transaction ID : SB17.94922</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3746.26
<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 131 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 9.00 <b>Transaction ID : SB17.94586</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER COSTS	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 <b>Transaction ID : SB17.94588</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER COSTS	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 96.00 <b>Transaction ID : SB17.94587</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER COSTS	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	106.50
<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 132 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.94879</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB17.94883</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 2.10 <b>Transaction ID : SB17.94878</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	317.10
<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 133 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 157.50 <b>Transaction ID : SB17.94877</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.94656</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 12.00 <b>Transaction ID : SB17.94881</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	198.50
<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 134 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 1.50 <b>Transaction ID : SB17.94882</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 6.00 <b>Transaction ID : SB17.94880</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISER FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.94840</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	37.50
<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 135 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 6.00 <b>Transaction ID : SB17.94839</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 156.00 <b>Transaction ID : SB17.94838</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 43.50 <b>Transaction ID : SB17.94837</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	205.50
<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 136 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period \$ 30.00 <b>Transaction ID : SB17.94836</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period \$ 12.00 <b>Transaction ID : SB17.94835</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period \$ 1.50 <b>Transaction ID : SB17.94834</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 43.50
<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 137 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 96.00 <b>Transaction ID : SB17.94833</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB17.94832</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 29.10 <b>Transaction ID : SB17.94831</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.10
<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 138 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 144 2ND STREET, 1ST FLOOR		Amount of Each Disbursement this Period 133.50 <b>Transaction ID : SB17.94830</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE FUNDRAISING FEES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PUBLIC OPINION STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 214 NORTH FAYETTE STREET		Amount of Each Disbursement this Period 13750.00 <b>Transaction ID : SB17.94693</b>
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement CAMPAIGN BENCHMARK POLLING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ALEX SCHARFETTER</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2014
Mailing Address 109 SCAMMEL ST. APT A		Amount of Each Disbursement this Period 1261.54 <b>Transaction ID : SB17.94688</b>
City MARIETTA	State OH	
Zip Code 45750	Purpose of Disbursement CAMPAIGN MILEAGE & TRAVEL REIMBURSEMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15145.04
<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 139 OF 152			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. ALEX SCHARFETTER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014	
Mailing Address 109 SCAMMEL ST. APT A			Amount of Each Disbursement this Period 994.47	
City MARIETTA	State OH	Zip Code 45750	Transaction ID : SB17.94696	
Purpose of Disbursement CAMPAIGN MILEAGE & TRAVEL REIMBURSEMENT		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. OHIO CHRISTIAN ALLIANCE</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address P.O. BOX 3076			Amount of Each Disbursement this Period 50.00	
City AKRON	State OH	Zip Code 44309	Transaction ID : SB17.94952	
Purpose of Disbursement CAMPAIGN MEALS		Category/ Type 002	[MEMO ITEM]	
Candidate Name <b>OHIO CHRISTIAN ALLIANCE</b>				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SECOND FREEDOM, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014	
Mailing Address PO BOX 5306			Amount of Each Disbursement this Period 500.00	
City POLAND	State OH	Zip Code 44514	Transaction ID : SB17.94685	
Purpose of Disbursement COMPLIANCE AND ACCOUNTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1494.47
<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 140 OF 152			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. SECOND FREEDOM, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address PO BOX 5306			Amount of Each Disbursement this Period 500.00	
City POLAND	State OH	Zip Code 44514	Transaction ID : SB17.94694	
Purpose of Disbursement ACCOUNTING AND COMPLIANCE RETAINER		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. SONOMA RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 233 PENNSYLVANIA AVE			Amount of Each Disbursement this Period 173.00	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.94663	
Purpose of Disbursement FUNDRAISER MEAL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. SONOMA RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 233 PENNSYLVANIA AVE			Amount of Each Disbursement this Period 897.75	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.94894	
Purpose of Disbursement FUNDRAISER MEALS		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1570.75
<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 141 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. SPECTRA ENERGY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 20 F STREET, NW, SUITE 5500		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.94571</b>
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement FUNDRAISING VENUE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SPEEDWAY 009185</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 400 MUSKINGUM DR		Amount of Each Disbursement this Period 5.42 <b>Transaction ID : SB17.94914</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN TRAVEL - MEAL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 1260 DORAL DR		Amount of Each Disbursement this Period 24.60 <b>Transaction ID : SB17.94557</b>
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	280.02
<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 142 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. STAPLES INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1260 DORAL DR		Amount of Each Disbursement this Period 40.98 <b>Transaction ID : SB17.94896</b>
City BOARDMAN State OH Zip Code 44512	Purpose of Disbursement OFFICE SUPPLIES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address PO BOX 905		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.94944</b>
City NEWTON State NJ Zip Code 07860	Purpose of Disbursement IN-KIND:FUNDRAISING EXPENSES Category/Type	
Candidate Name SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address PO BOX 905		Amount of Each Disbursement this Period 348.75 <b>Transaction ID : SB17.94946</b>
City NEWTON State NJ Zip Code 07860	Purpose of Disbursement IN-KIND: CATERING EXPENSES Category/Type	
Candidate Name SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1039.75
<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 143 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. THE RITZ-CARLTON</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 280 VANDERBILT BEACH ROAD		Amount of Each Disbursement this Period 398.49 <b>Transaction ID : SB17.94561</b>
City NAPLES	State FL	
Zip Code 34108	Purpose of Disbursement CAMPAIGN TRAVEL - LODGING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TIM GINTER FOR STATE REPRESENTATIVE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 846 HOMEWOOD AVE		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.94697</b>
City SALEM	State OH	
Zip Code 44460	Purpose of Disbursement CONTRIBUTION	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. U S POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 99 S WALNUT ST		Amount of Each Disbursement this Period 132.00 <b>Transaction ID : SB17.94556</b>
City YOUNGSTOWN	State OH	
Zip Code 44501	Purpose of Disbursement CAMPAIGN POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	780.49
<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 144 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. UNITED PARCEL SERVICE, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 64.25 <b>Transaction ID : SB17.94680</b>
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN POSTAGE FOR PACKAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED PARCEL SERVICE, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 55 GLENLAKE PARKWAY NE		Amount of Each Disbursement this Period 38.94 <b>Transaction ID : SB17.94888</b>
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CAMPAIGN POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UNITED STATES POSTAL SERVICE - MARIETTA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 19.99 <b>Transaction ID : SB17.94552</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	123.18
<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 145 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. UNITED STATES POSTAL SERVICE - MARIETTA</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 5.60 <b>Transaction ID : SB17.94665</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. UNITED STATES POSTAL SERVICE - MARIETTA</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : SB17.94666</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. UNITED STATES POSTAL SERVICE - MARIETTA</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2014
Mailing Address 100 POST ST		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.94678</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	544.60
<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 146 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. UNITED STATES POSTAL SERVICE - MARIETTA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 19 / 2014</b>
Mailing Address 100 POST ST		Amount of Each Disbursement this Period <b>5.60</b>
City MARIETTA State OH Zip Code 45750	Purpose of Disbursement CAMPAIGN POSTAGE	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.94924</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VENABLE, LLP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2014</b>
Mailing Address 575 7TH STREET NW		Amount of Each Disbursement this Period <b>323.75</b>
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement MEALS FOR FUNDRAISING EVENT	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.94560</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. W.MILLAR &amp; CO.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 05 / 2014</b>
Mailing Address 1335 14TH STREET NW		Amount of Each Disbursement this Period <b>218.31</b>
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement FUNDRAISER MEALS	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.94660</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>547.66</b>
<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 147 OF 152			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. W.MILLAR &amp; CO.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014		
Mailing Address 1335 14TH STREET NW			Amount of Each Disbursement this Period 20.00		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.94661		
Purpose of Disbursement FUNDRAISER MEALS		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WALMART</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014		
Mailing Address 702 SW 8TH STREET			Amount of Each Disbursement this Period 58.92		
City BENTONVILLE	State AR	Zip Code 72716	Transaction ID : SB17.94559		
Purpose of Disbursement OFFICE SUPPLIES		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WALMART</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014		
Mailing Address 702 SW 8TH STREET			Amount of Each Disbursement this Period 42.64		
City BENTONVILLE	State AR	Zip Code 72716	Transaction ID : SB17.94681		
Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	121.56
<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 148 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. WALMART</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 68.08
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement CAMPAIGN OFFICE SUPPLIES	Category/Type 001	<b>Transaction ID : SB17.94884</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BILL JOHNSON</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 519 FIFTH STREET		Amount of Each Disbursement this Period 2392.85
City MARIETTA	State OH Zip Code 45750	
Purpose of Disbursement REIMBURSE CAMPAIGN TRAVEL COSTS	Category/Type 001	<b>Transaction ID : SB17.94572</b>
Candidate Name <b>BILL JOHNSON</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 06		

Full Name (Last, First, Middle Initial) <b>C. BILL JOHNSON</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 519 FIFTH STREET		Amount of Each Disbursement this Period 2321.42
City MARIETTA	State OH Zip Code 45750	
Purpose of Disbursement REIMBURSE FOR FUNDRAISER MEALS	Category/Type 001	<b>Transaction ID : SB17.94573</b>
Candidate Name <b>BILL JOHNSON</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OH District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4782.35
<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 149 OF 152	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. UNDO'S CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1165 MARKET ST		Amount of Each Disbursement this Period 2321.42
City WHEELING	State WV	
Zip Code 26003	Purpose of Disbursement CAMPAIGN FUNDRAISING VENUE AND MEALS	Transaction ID : SB17.94574
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	140357.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 152			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) <b>A. DAVID JOHNSON</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014		
Mailing Address 570 HIGHLAND AVE			Amount of Each Disbursement this Period 500.00		
City SALEM	State OH	Zip Code 44460	Transaction ID : SB20A.94569		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

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

Form/Schedule: SB20A

Transaction ID : SB20A.94569

REFUND CONTRIBUTION RECEIVED ON 4/16/2014 THAT EXCEEDED LIMITS.

Form/Schedule:

Transaction ID:

**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)

**JOHNSON FOR CONGRESS**

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

Mailing Address 519 FIFTH STREET

City State Zip Code  
 MARIETTA OH 45750

Nature of Debt (Purpose):  
 FUNDRAISER MEALS

Outstanding Balance Beginning This Period **Transaction ID : SD10.8**  
 2321.42

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 2321.42 0.00

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

Mailing Address 519 FIFTH STREET

City State Zip Code  
 MARIETTA OH 45750

Nature of Debt (Purpose):  
 CAMPAIGN TRAVEL EXPENSES

Outstanding Balance Beginning This Period **Transaction ID : SD10.11**  
 2392.85

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 2392.85 0.00

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	0.00
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) ▶	