

**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.

1 2 F E 4 M 5

Jacob Turk for Congress 2014

ADDRESS (number and street)

417 SE Annette Street



Check if different than previously reported. (ACC)

Lees Summit

MO

64063

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00563668

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MO

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

01

Y Y Y Y

2017

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2017

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

Turk, Donna, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Turk, Donna, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

30

Y Y Y Y

2018

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 10

Write or Type Committee Name

Jacob Turk for Congress 2014

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	7

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	7

	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))....	0.00	16200.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	25.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	16175.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	56.97	10642.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	205.87
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	56.97	10436.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2.67	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	656.97	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 10

Write or Type Committee Name

Jacob Turk for Congress 2014

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	7

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	7

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).....**

0.00

15845.00

(ii) Unitemized.....

0.00

355.00

(iii) TOTAL of contributions from individuals ▶

0.00

16200.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0.00

16200.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

56.97

656.97

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

56.97

656.97

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

205.87

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

56.97

17062.84

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 10

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

56.97

10642.86

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

25.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

25.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

56.97

10667.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

2.67

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

56.97

25. SUBTOTAL (add Line 23 and Line 24).....

59.64

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

56.97

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

2.67

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 10

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

Jacob Turk for Congress 2014

A. Full Name (Last, First, Middle Initial) Turk, Jacob, , ,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 30 / 2017	
Mailing Address 417 SE Annette Street			Transaction ID : SA13A.5089	
City Lees Summit	State MO	Zip Code 64063	Amount of Each Receipt this Period 56.97	
FEC ID number of contributing federal political committee. C H6MO05189		Name of Employer Self		
Occupation Educational Consultant		Election Cycle-to-Date 656.97		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item Loan to campaign from Jacob Turk		
B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....			56.97	
TOTAL This Period (last page this line number only).....			56.97	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 10

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

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NAME OF COMMITTEE (In Full)

Jacob Turk for Congress 2014

Full Name (Last, First, Middle Initial)

A. Square Space

Mailing Address 459 Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2017

City
New YorkState
NYZip Code
10013Purpose of Disbursement
Website hosting

001

FEC Identification Number

C C00563668

Candidate Name

Jacob Turk for Congress 2014

Category/
Type

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.5083

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 05

Full Name (Last, First, Middle Initial)

B. Square Space

Mailing Address 459 Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2017

City
New YorkState
NYZip Code
10013Purpose of Disbursement
Website hosting

001

FEC Identification Number

C C00563668

Candidate Name

Jacob Turk for Congress 2014

Category/
Type

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.5083

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 05

Full Name (Last, First, Middle Initial)

C. Square Space

Mailing Address 459 Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2017

City
New YorkState
NYZip Code
10013Purpose of Disbursement
Website hosting

001

FEC Identification Number

C C00563668

Candidate Name

Jacob Turk for Congress 2014

Category/
Type

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.5087

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO

District: 05

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

48.00

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

48.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 7 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5048

Jacob Turk for Congress 2014

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200.00

0.00

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2017 Y

M M /

D D /

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 8 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5067

Jacob Turk for Congress 2014

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

220.00

0.00

220.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 30 D

Y 2017 Y

M M

D D

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

220.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 9 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5080

Jacob Turk for Congress 2014

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☐ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

180.00

0.00

180.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 09 M

/ D 30 D

/ Y 2017 Y

M M

/ D D

/ Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

180.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 10 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5089

Jacob Turk for Congress 2014

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

56.97

0.00

56.97

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 30^D

Y 2017 Y

M M

D D

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

56.97

TOTALS This Period (last page in this line only).....▶

656.97

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.