

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
Westmoreland For Congress

ADDRESS (number and street) P.O. Box 458
Check if different than previously reported. (ACC)
Sharpsburg GA 30277-0458

2. **FEC IDENTIFICATION NUMBER** C C00387126
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
GA 03

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 01 / 01 / 2016 through M M / D D / Y Y Y Y 03 / 31 / 2016

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

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer Paul Kilgore

[Electronically Filed]

Date

M M / D D / Y Y Y Y 04 / 15 / 2016

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Westmoreland 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))....	0.00	434469.87
(b) Total Contribution Refunds (from Line 20(d))	44300.00	49300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-44300.00	385169.87
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	63193.46	359547.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1127.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	63193.46	358420.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	413980.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Westmoreland 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).....	0.00	155952.40
(ii) Unitemized	0.00	4387.00
(iii) TOTAL of contributions from individuals ▶	0.00	160339.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	274130.47
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	434469.87
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	150.00	17345.42
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	1127.00
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)..... ▶	150.00	452942.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	63193.46	359547.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	3800.00
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	16800.00	21800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	27500.00	27500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	44300.00	49300.00
21. OTHER DISBURSEMENTS	3500.00	87825.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	110993.46	500472.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	524823.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	150.00
25. SUBTOTAL (add Line 23 and Line 24).....	524973.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	110993.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	413980.48

**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 5 OF 43			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Willis Consulting		Date of Disbursement MM / DD / YYYY 01 / 01 / 2016
Mailing Address 3126 Bransford Rd		Amount of Each Disbursement this Period 4000.00
City Augusta	State GA	
Zip Code 30909-3008	Purpose of Disbursement Fundraising Consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B25B7707B89704D9EAEB
Office Sought: <input type="checkbox"/> House <input 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. ADP Easypay Atlanta		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 161.36
City Atlanta	State GA	
Zip Code 30328-4668	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : BC0F2D96F972D4782BFF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andy Bush		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address PO Box 458		Amount of Each Disbursement this Period 460.83
City Sharpsburg	State GA	
Zip Code 30277-0458	Purpose of Disbursement Staff Salary	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B312A84E8E57D4638A90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4622.19
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 6 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Matthew Brass		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 20 Parks Ave.		Amount of Each Disbursement this Period 460.71
City Newnan	State GA	
Zip Code 30263-1559	Purpose of Disbursement Salary	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B9693EFAD747E4509A13
Office Sought: <input type="checkbox"/> House <input 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. Digital Express Printing		Date of Disbursement MM / DD / YYYY 01 / 05 / 2016
Mailing Address 2211 Beaver Run Rd		Amount of Each Disbursement this Period 3359.93
City Norcross	State GA	
Zip Code 30071-3348	Purpose of Disbursement Printing	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : BE32C442D29B04390BB1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Professional Data Services		Date of Disbursement MM / DD / YYYY 01 / 05 / 2016
Mailing Address 824 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 1505.34
City Athens	State GA	
Zip Code 30605-1332	Purpose of Disbursement Compliance Consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : B20022F5B88E64908937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5325.98
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 7 OF 43			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Red River Co. LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016	
Mailing Address PO Box 21027			Amount of Each Disbursement this Period 8331.69	
City Washington	State DC	Zip Code 20009	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Fundraising Consulting		Category/ Type 001		
Candidate Name			Transaction ID : BFEACAC6B46E1475486B	
Office Sought: <input type="checkbox"/> House <input 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. American Express			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016	
Mailing Address PO Box 53852			Amount of Each Disbursement this Period 7.00	
City Phoenix	State AZ	Zip Code 85072-3852	<input type="checkbox"/> Memo Item	
Purpose of Disbursement CC Transaction Fees		Category/ Type 001		
Candidate Name			Transaction ID : BB77BF83775E94615B12	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Arthur Murphy Florist			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 6 Lagrange St			Amount of Each Disbursement this Period 97.90	
City Newnan	State GA	Zip Code 30263-2604	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Flowers		Category/ Type 001		
Candidate Name			Transaction ID : B2C221A6FB8774B40898	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	8436.59
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 8 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. White Oak Holdings			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016		
Mailing Address 1635 Highway 34 E			Amount of Each Disbursement this Period 450.00		
City Newnan	State GA	Zip Code 30265-2173	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Rent		Category/ Type 001			
Candidate Name			Transaction ID : B1B8F1258CB69429399F		
Office Sought: <input type="checkbox"/> House <input 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. NuLink Digital			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016		
Mailing Address 2A Jackson St			Amount of Each Disbursement this Period 149.88		
City Newnan	State GA	Zip Code 30263-1929	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Telephone		Category/ Type 001			
Candidate Name			Transaction ID : B403685ED7FCF4A689CF		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) c. ADP Easypay Atlanta			Date of Disbursement MM / DD / YYYY 01 / 08 / 2016		
Mailing Address 5680 New Northside Dr NW			Amount of Each Disbursement this Period 120.15		
City Atlanta	State GA	Zip Code 30328-4668	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Payroll Service Fees		Category/ Type 001			
Candidate Name			Transaction ID : BFCCB19D84D0347DD815		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	720.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Digital Express Printing		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2016
Mailing Address 2211 Beaver Ruin Rd		Amount of Each Disbursement this Period 359.92
City Norcross	State GA Zip Code 30071-3348	
Purpose of Disbursement Printing	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B57547AC799214A2A9DD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. ADP Easypay Atlanta		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 77.90
City Atlanta	State GA Zip Code 30328-4668	
Purpose of Disbursement Payroll Service Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B8091C972F4574A70A17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Andy Bush		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2016
Mailing Address PO Box 458		Amount of Each Disbursement this Period 368.76
City Sharpsburg	State GA Zip Code 30277-0458	
Purpose of Disbursement Mileage	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BADB447FB5C4D4D57A08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	806.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Willis Consulting			Date of Disbursement MM / DD / YYYY 01 / 22 / 2016		
Mailing Address 3126 Bransford Rd			Amount of Each Disbursement this Period 4000.00		
City Augusta	State GA	Zip Code 30909-3008	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	Transaction ID : B5C3D05ECDBBC423E861		
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. NuLink Digital			Date of Disbursement MM / DD / YYYY 02 / 01 / 2016		
Mailing Address 2A Jackson St			Amount of Each Disbursement this Period 149.88		
City Newnan	State GA	Zip Code 30263-1929	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Telephone		Category/ Type 001	Transaction ID : B28578D29447C49B38B2		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. SCM Associates, Inc.			Date of Disbursement MM / DD / YYYY 02 / 01 / 2016		
Mailing Address 1283 Main St			Amount of Each Disbursement this Period 2204.80		
City Dublin	State NH	Zip Code 03444-8242	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Direct Mail Production		Category/ Type 001	Transaction ID : BF6A1A05A9F294360A76		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	6354.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. White Oak Holdings		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 1635 Highway 34 E		Amount of Each Disbursement this Period 450.00
City Newnan	State GA	
Zip Code 30265-2173	Purpose of Disbursement Office Rent	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : BFECCEAD945D24B14B41
Office Sought: <input type="checkbox"/> House <input 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. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 824 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 3002.91
City Athens	State GA	
Zip Code 30605-1332	Purpose of Disbursement Compliance Consulting	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : B7D33243ED474465EB67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Easypay Atlanta		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 161.36
City Atlanta	State GA	
Zip Code 30328-4668	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : B9FC11DF4A5F14A52BA0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3614.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Matthew Brass		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address 20 Parks Ave.		Amount of Each Disbursement this Period 460.71
City Newnan	State GA	Zip Code 30263-1559
Purpose of Disbursement Staff Salary	Category/ Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : BDF303E01A5A24434947	

Full Name (Last, First, Middle Initial) B. Andy Bush		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address PO Box 458		Amount of Each Disbursement this Period 460.83
City Sharpsburg	State GA	Zip Code 30277-0458
Purpose of Disbursement Staff Salary	Category/ Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : B7797B1B2BA4C4B8585E	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement MM / DD / YYYY 02 / 04 / 2016
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.00
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement CC Transaction Fees	Category/ Type 001	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Transaction ID : BF573E99B93C34B968FE	

SUBTOTAL of Disbursements This Page (optional).....	928.54
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 13 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. ADP Easypay Atlanta		Date of Disbursement MM / DD / YYYY 02 / 12 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 120.15
City Atlanta State GA Zip Code 30328-4668	Purpose of Disbursement Payroll Service 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)	<input type="checkbox"/> Memo Item Transaction ID : B4A695B52E8E442A28D5
State: District:		

Full Name (Last, First, Middle Initial) B. Arthur Murphy Florist		Date of Disbursement MM / DD / YYYY 02 / 18 / 2016
Mailing Address 6 Lagrange St		Amount of Each Disbursement this Period 187.52
City Newnan State GA Zip Code 30263-2604	Purpose of Disbursement Flowers 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)	<input type="checkbox"/> Memo Item Transaction ID : B0CB9D3D8299E4EE8878
State: District:		

Full Name (Last, First, Middle Initial) C. Willis Consulting		Date of Disbursement MM / DD / YYYY 02 / 19 / 2016
Mailing Address 3126 Bransford Rd		Amount of Each Disbursement this Period 4000.00
City Augusta State GA Zip Code 30909-3008	Purpose of Disbursement Fundraising Consulting 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)	<input type="checkbox"/> Memo Item Transaction ID : BC9D960A32DB14181AED
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4307.67
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 14 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. The River Room		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 605 Reynolds St		Amount of Each Disbursement this Period 750.00
City Augusta	State GA	
Zip Code 30901-1431	Purpose of Disbursement Event Facility Rental	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : B06434C2CF0F44738AAF
Office Sought: <input type="checkbox"/> House <input 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. The Bedford School		Date of Disbursement MM / DD / YYYY 03 / 02 / 2016
Mailing Address 5665 Milam Rd		Amount of Each Disbursement this Period 450.00
City Fairburn	State GA	
Zip Code 30213-2851	Purpose of Disbursement Event Tickets	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : BEF932BADBA1044F1941
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ADP Easypay Atlanta		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 161.36
City Atlanta	State GA	
Zip Code 30328-4668	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B5073433043114B92A38
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1361.36
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 15 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. White Oak Holdings			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016		
Mailing Address 1635 Highway 34 E			Amount of Each Disbursement this Period 450.00		
City Newnan	State GA	Zip Code 30265-2173	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Office Rent		Category/ Type 001			
Candidate Name			Transaction ID : BC72ED7F5F6254CBEB90		
Office Sought: <input type="checkbox"/> House <input 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. NuLink Digital			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016		
Mailing Address 2A Jackson St			Amount of Each Disbursement this Period 149.88		
City Newnan	State GA	Zip Code 30263-1929	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Telephone		Category/ Type 001			
Candidate Name			Transaction ID : B3FC961D7C80C4D0888D		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. Professional Data Services			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016		
Mailing Address 824 S Milledge Ave Ste 101			Amount of Each Disbursement this Period 1581.54		
City Athens	State GA	Zip Code 30605-1332	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Compliance Consulting		Category/ Type 001			
Candidate Name			Transaction ID : B52FFA5A6CB084A0481E		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	2181.42
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 16 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.00
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CC Transaction Fees	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : BB79028186EB14553B34
Office Sought: <input type="checkbox"/> House <input 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. Andy Bush		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address PO Box 458		Amount of Each Disbursement this Period 460.83
City Sharpsburg	State GA	
Zip Code 30277-0458	Purpose of Disbursement Staff Salary	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : B8402AE6FACD7477ABC4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew Brass		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address 20 Parks Ave.		Amount of Each Disbursement this Period 460.71
City Newnan	State GA	
Zip Code 30263-1559	Purpose of Disbursement Staff Salary	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : BFC527EE5036D4100B11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	928.54
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 17 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. ADP Easy pay Atlanta		Date of Disbursement MM / DD / YYYY 03 / 11 / 2016
Mailing Address 5680 New Northside Dr NW		Amount of Each Disbursement this Period 120.15
City Atlanta	State GA Zip Code 30328-4668	
Purpose of Disbursement Payroll Services Fees	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B09447DC5A6AB4F8C87A
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. The Congressional Club		Date of Disbursement MM / DD / YYYY 03 / 21 / 2016
Mailing Address 2001 New Hampshire Ave NW		Amount of Each Disbursement this Period 15.00
City Washington	State DC Zip Code 20009-3414	
Purpose of Disbursement Event Tickets	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B9B24F3572B4D4A38AF2
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. The Congressional Club		Date of Disbursement MM / DD / YYYY 03 / 21 / 2016
Mailing Address 2001 New Hampshire Ave NW		Amount of Each Disbursement this Period 500.00
City Washington	State DC Zip Code 20009-3414	
Purpose of Disbursement Event Tickets	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BAE1DD11DBB1B4BC5B13
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	635.15
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 18 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Willis Consulting		Date of Disbursement MM / DD / YYYY 03 / 24 / 2016
Mailing Address 3126 Bransford Rd		Amount of Each Disbursement this Period 4000.00
City Augusta	State GA	
Zip Code 30909-3008	Purpose of Disbursement Fundraising Consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B268DDF3C69A548108FA
Office Sought: <input type="checkbox"/> House <input 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. Arthur Murphy Florist		Date of Disbursement MM / DD / YYYY 03 / 24 / 2016
Mailing Address 6 Lagrange St		Amount of Each Disbursement this Period 165.05
City Newnan	State GA	
Zip Code 30263-2604	Purpose of Disbursement Flowers	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B281A8E3471034AB2913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NuLink Digital		Date of Disbursement MM / DD / YYYY 03 / 24 / 2016
Mailing Address 2A Jackson St		Amount of Each Disbursement this Period 150.12
City Newnan	State GA	
Zip Code 30263-1929	Purpose of Disbursement Telephone	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B5C3C3C25049D4B9C801
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4315.17
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 19 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Henry County GOP		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address P.O. Box 2455		Amount of Each Disbursement this Period 300.00
City Mcdonough	State GA	
Zip Code 30253	Purpose of Disbursement Event Tickets	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : BCF8F62EED7E04515906
Office Sought: <input type="checkbox"/> House <input 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. Digital Express Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 2211 Beaver Ruin Rd		Amount of Each Disbursement this Period 939.59
City Norcross	State GA	
Zip Code 30071-3348	Purpose of Disbursement Printing	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : BFCA1EC4D9B174619918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 824 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 1509.28
City Athens	State GA	
Zip Code 30605-1332	Purpose of Disbursement Compliance Consulting	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : B4EA0AB96628E468CA31
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2748.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Card Services		M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address P.O. Box 2181		Amount of Each Disbursement this Period	
City Columbus State GA Zip Code 31902-2181		6528.67	
Purpose of Disbursement See Memo		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : B9C72E02A11EA4694AC6	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:		Other (specify)	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Capitol Hill Club		M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20003-1801		257.31	
Purpose of Disbursement Event Catering		<input checked="" type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : BE05DB90EF83B4B478BA	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:		Other (specify)	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Verizon Wireless		M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period	
City Dallas State TX Zip Code 75266-0108		446.48	
Purpose of Disbursement Cell Phone		<input checked="" type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : BD63CCABED86A4DA78A9	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:		Other (specify)	
Category/Type		001	

SUBTOTAL of Disbursements This Page (optional).....	6528.67
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 21 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address Hartsfield Int'l Airport			Amount of Each Disbursement this Period 664.20	
City Atlanta	State GA	Zip Code 30309	<input checked="" type="checkbox"/> Memo Item Transaction ID : B9B9D5B0269FE4204A1A	
Purpose of Disbursement Airfare		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. House Gift Shop			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address US House Of Representatives			Amount of Each Disbursement this Period 319.95	
City Washington	State DC	Zip Code 20515-0001	<input checked="" type="checkbox"/> Memo Item Transaction ID : BBAA6C72CF60A47FD906	
Purpose of Disbursement Gifts		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Boston Coach			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address 69 Norman St			Amount of Each Disbursement this Period 238.18	
City Everett	State MA	Zip Code 02149-1951	<input checked="" type="checkbox"/> Memo Item Transaction ID : B994B02300ACB41779CB	
Purpose of Disbursement Travel 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:				

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Acadiana Restaurant			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address 901 New York Ave NW			Amount of Each Disbursement this Period 495.90	
City Washington	State DC	Zip Code 20001-4432	<input checked="" type="checkbox"/> Memo Item Transaction ID : BF2D1423BC6224582819	
Purpose of Disbursement Event Catering		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. Card Services			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address P.O. Box 2181			Amount of Each Disbursement this Period 87.69	
City Columbus	State GA	Zip Code 31902-2181	<input checked="" type="checkbox"/> Memo Item Transaction ID : BAFAB7A7313CE4D5FA35	
Purpose of Disbursement Credit Card 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) c. Carmine's			Date of Disbursement MM / DD / YYYY 01 / 07 / 2016	
Mailing Address 1802 E 7th Ave			Amount of Each Disbursement this Period 349.48	
City Tampa	State FL	Zip Code 33605-3808	<input checked="" type="checkbox"/> Memo Item Transaction ID : B19ACCE1623D242FEAE4	
Purpose of Disbursement Event Catering		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Del Frisco's			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 729 Lee Rd			Amount of Each Disbursement this Period 3500.00	
City Orlando	State FL	Zip Code 32810-5621	<input checked="" type="checkbox"/> Memo Item Transaction ID : BE9F9382D94DA401C9AA	
Purpose of Disbursement Event Catering		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. Newtek Technology Services			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016	
Mailing Address 1125 W Pinnacle Peak Rd Ste 103			Amount of Each Disbursement this Period 26.95	
City Phoenix	State AZ	Zip Code 85027-1368	<input checked="" type="checkbox"/> Memo Item Transaction ID : BEB8B0BBD8E4C46DBA40	
Purpose of Disbursement Web Hosting		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Card Services			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016	
Mailing Address P.O. Box 2181			Amount of Each Disbursement this Period 5554.43	
City Columbus	State GA	Zip Code 31902-2181	<input type="checkbox"/> Memo Item Transaction ID : BFB3DE3B86D1C4643BE0	
Purpose of Disbursement See Memo		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5554.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 6545 Hwy 54		Amount of Each Disbursement this Period 0.00
City Sharpsburg	State GA	
Zip Code 30277	Purpose of Disbursement Postage	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : BF917B40ACF624FF198C
State: District:		

Full Name (Last, First, Middle Initial) B. Hill Country BBQ		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 502.46
City Washington	State DC	
Zip Code 20004-2217	Purpose of Disbursement Event Catering	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B6B6D4C7AB0A74C8D804
State: District:		

Full Name (Last, First, Middle Initial) c. Georgia Gifts and More		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 3781 Presidential Pkwy #137		Amount of Each Disbursement this Period 820.88
City Atlanta	State GA	
Zip Code 30340-3726	Purpose of Disbursement Gifts	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : BEAC917B4F39348609F7
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. House Gift Shop		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address US House Of Representatives		Amount of Each Disbursement this Period 282.00
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Gifts	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B5379CBFC3F0D4601B11
Office Sought: <input type="checkbox"/> House <input 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. Gogo Air		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1250 N Arlington Heights Rd Ste 50		Amount of Each Disbursement this Period 538.95
City Itasca	State IL	
Zip Code 60143-1216	Purpose of Disbursement Internet Service	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B0EE9767C613542808A8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mama Lucia's Restaurant		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 236 Newnan Crossing Bypass		Amount of Each Disbursement this Period 2368.82
City Newnan	State GA	
Zip Code 30265-1077	Purpose of Disbursement Event Catering	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : B33075F24F41C43809A1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 376.61
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Cell Phone	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B559637A61BC64E42884
State: District:		

Full Name (Last, First, Middle Initial) B. Newtek Technology Services		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1125 W Pinnacle Peak Rd Ste 103		Amount of Each Disbursement this Period 26.95
City Phoenix	State AZ	
Zip Code 85027-1368	Purpose of Disbursement Web Hosting	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B66BDA906D8D743F1A47
State: District:		

Full Name (Last, First, Middle Initial) C. Acqua AI 2		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 212 7th St SE		Amount of Each Disbursement this Period 41.83
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Meeting Expense	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : BC8648E958F494A03898
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 262 Robert C Daniels Jr Pkwy		Amount of Each Disbursement this Period 32.57
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Shipping	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : BAD9DD70C50D8482C955
State: District:		

Full Name (Last, First, Middle Initial) B. Card Services		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address P.O. Box 2181		Amount of Each Disbursement this Period 118.81
City Columbus	State GA	
Zip Code 31902-2181	Purpose of Disbursement Credit Card Fees	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B14E3F65D65D04ADBBED
State: District:		

Full Name (Last, First, Middle Initial) c. Bullfeathers		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 401 1st St SE		Amount of Each Disbursement this Period 28.00
City Washington	State DC	
Zip Code 20003-1827	Purpose of Disbursement Meeting Expense	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B42E8E4C560D341CE8E5
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 43			
	<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)
Westmoreland For Congress

A. Due South

Full Name (Last, First, Middle Initial)
Mailing Address 301 Water St SE

City Washington State DC Zip Code 20003-3734

Purpose of Disbursement Meeting Expense
Candidate Name

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

State: District:

Date of Disbursement: 02 / 01 / 2016

Amount of Each Disbursement this Period: 200.20

Memo Item

Transaction ID : B1C35739E46894C068F4

B. Capitol Hill Club

Full Name (Last, First, Middle Initial)
Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement Meeting Expense
Candidate Name

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

State: District:

Date of Disbursement: 02 / 01 / 2016

Amount of Each Disbursement this Period: 31.90

Memo Item

Transaction ID : BFB57A41B52374EC7B1A

C. Card Services

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2181

City Columbus State GA Zip Code 31902-2181

Purpose of Disbursement See Memo
Candidate Name

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

State: District:

Date of Disbursement: 03 / 04 / 2016

Amount of Each Disbursement this Period: 1411.07

Memo Item

Transaction ID : B19E614400F0743B8B48

SUBTOTAL of Disbursements This Page (optional) 1411.07

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 29 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 386.29
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Cell Phone	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : BA4BAC12BA75B47F8A4A
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address 6545 Hwy 54		Amount of Each Disbursement this Period 30.30
City Sharpsburg	State GA	
Zip Code 30277	Purpose of Disbursement Postage	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B3D0D6F63D990481BB98
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 141.56
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : B1E05B2682E5A4C8FB3C
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Sprayberry's BBQ			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 229 Jackson St			Amount of Each Disbursement this Period 98.41	
City Newnan	State GA	Zip Code 30263-1156	<input checked="" type="checkbox"/> Memo Item Transaction ID : B5FD3098F2231401BA88	
Purpose of Disbursement Meeting Expense		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. FedEx			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 262 Robert C Daniels Jr Pkwy			Amount of Each Disbursement this Period 34.75	
City Augusta	State GA	Zip Code 30909	<input checked="" type="checkbox"/> Memo Item Transaction ID : BD4673E8488744CC0A32	
Purpose of Disbursement Shipping		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Bullfeathers			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 401 1st St SE			Amount of Each Disbursement this Period 74.00	
City Washington	State DC	Zip Code 20003-1827	<input checked="" type="checkbox"/> Memo Item Transaction ID : B214BD92201EC4364B33	
Purpose of Disbursement Meeting Expense		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Chick-fil-A			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 5 Glenda Trace			Amount of Each Disbursement this Period 33.27	
City Newnan	State GA	Zip Code 30263	<input checked="" type="checkbox"/> Memo Item Transaction ID : BF511FBC0BBB04E46A38	
Purpose of Disbursement Meeting Expense		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Newtek Technology Services			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 1125 W Pinnacle Peak Rd Ste 103			Amount of Each Disbursement this Period 26.95	
City Phoenix	State AZ	Zip Code 85027-1368	<input checked="" type="checkbox"/> Memo Item Transaction ID : B1B1520A38F394EBB86D	
Purpose of Disbursement Web Hosting		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Tortilla Coast			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 400 1st St SE			Amount of Each Disbursement this Period 142.75	
City Washington	State DC	Zip Code 20003-1826	<input checked="" type="checkbox"/> Memo Item Transaction ID : B62FA996A571D4FD995A	
Purpose of Disbursement Meeting Expense		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Card Services		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
Mailing Address P.O. Box 2181		Amount of Each Disbursement this Period
City Columbus State GA Zip Code 31902-2181		<input type="text" value="2412.25"/>
Purpose of Disbursement See Memo		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : BE0D6CEC5DC6C486099A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <input type="text" value="001"/>	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Newtek Technology Services		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
Mailing Address 1125 W Pinnacle Peak Rd Ste 103		Amount of Each Disbursement this Period
City Phoenix State AZ Zip Code 85027-1368		<input type="text" value="26.95"/>
Purpose of Disbursement Web Hosting		<input checked="" type="checkbox"/> Memo Item
Candidate Name		Transaction ID : B5AC2C46D98F441C685C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <input type="text" value="001"/>	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Bullfeathers		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2016"/>
Mailing Address 401 1st St SE		Amount of Each Disbursement this Period
City Washington State DC Zip Code 20003-1827		<input type="text" value="68.00"/>
Purpose of Disbursement Meeting Expense		<input checked="" type="checkbox"/> Memo Item
Candidate Name		Transaction ID : BE1F7306455AF4397901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <input type="text" value="001"/>	

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="2412.25"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address PO Box 53852			Amount of Each Disbursement this Period 49.99
City Phoenix	State AZ	Zip Code 85072-3852	<input checked="" type="checkbox"/> Memo Item Transaction ID : B74DFB5607EC0474CA27
Purpose of Disbursement Travel Expense		001 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. Delta Airlines			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address Hartsfield Int'l Airport			Amount of Each Disbursement this Period 833.20
City Atlanta	State GA	Zip Code 30309	<input checked="" type="checkbox"/> Memo Item Transaction ID : B76CE985E3FC34F6AAC2
Purpose of Disbursement Airfare		001 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) c. Due South			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 301 Water St SE			Amount of Each Disbursement this Period 101.40
City Washington	State DC	Zip Code 20003-3734	<input checked="" type="checkbox"/> Memo Item Transaction ID : B87AED64846D94888A92
Purpose of Disbursement Meeting Expense		001 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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Chick-fil-A		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 5 Glenda Trace		Amount of Each Disbursement this Period 472.23
City Newnan State GA Zip Code 30263	Purpose of Disbursement Event Catering <input type="checkbox"/> 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B30198E180B6F460B8C9
State: District:		

Full Name (Last, First, Middle Initial) B. Card Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address P.O. Box 2181		Amount of Each Disbursement this Period 39.00
City Columbus State GA Zip Code 31902-2181	Purpose of Disbursement Credit Card Fees <input type="checkbox"/> 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BCBD761A25FC44AE0BD9
State: District:		

Full Name (Last, First, Middle Initial) c. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period 32.19
City Washington State DC Zip Code 20003-1826	Purpose of Disbursement Meeting Expense <input type="checkbox"/> 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BEAF8668C7A3944CD894
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 43	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 471.11
City Dallas State TX Zip Code 75266-0108	Purpose of Disbursement Cell Phone <input type="checkbox"/> 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : BF924BDC5512A4A13981
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		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		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	63193.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 43	
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. W.T. Paul		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 3802 Bay Creek Rd		Amount of Each Disbursement this Period 2700.00
City Loganville	State GA Zip Code 30052-2137	
Purpose of Disbursement Refund: Refund	Category/Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B07435C172E94452C843
Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. James Stephenson		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address PO Box 43326		Amount of Each Disbursement this Period 2700.00
City Atlanta	State GA Zip Code 30336-0326	
Purpose of Disbursement Refund: Refund	Category/Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B64DC0CDDDB1654E00B41
Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Aaron McWhorter		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 1490 Black Dirt Rd		Amount of Each Disbursement this Period 2700.00
City Whitesburg	State GA Zip Code 30185-2749	
Purpose of Disbursement Refund: Refund	Category/Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : BBE594169A6F94CEA8B9
Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 43			
	<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)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. James Daniel		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address PO Box 310		Amount of Each Disbursement this Period 500.00
City Lagrange	State GA	
Zip Code 30241-0006	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 010	Transaction ID : BB502D54DB0CE484AAAE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Phyllis Paul		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 3802 Bay Creek Rd		Amount of Each Disbursement this Period 2700.00
City Loganville	State GA	
Zip Code 30052-2137	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 010	Transaction ID : B9F23803148964081B0C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Donna Stephenson		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address PO Box 43326		Amount of Each Disbursement this Period 2700.00
City Atlanta	State GA	
Zip Code 30336-0326	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 010	Transaction ID : B3810FB1A62874FFF8FD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 43	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Mr. Albert P. Hegyi		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 795 Hulls Farm Rd		Amount of Each Disbursement this Period 2700.00
City Southport State CT Zip Code 06890-1029	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 010	Transaction ID : B9044D3E762B046C3B8B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	16700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Lockheed Martin PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 1550 Crystal Dr		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item Transaction ID : B2949BE99B301443CAEA
City Arlington	State VA	
Zip Code 22202-4135	Purpose of Disbursement Refund: Refund	Category/ Type 010
Candidate Name Lockheed Martin PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Majority Committee PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address PO Box 10134		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Memo Item Transaction ID : BD374484E41E44FF9A63
City Bakersfield	State CA	
Zip Code 93389-0134	Purpose of Disbursement Refund: Refund	Category/ Type 010
Candidate Name Majority Committee PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AFLAC, Inc. PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2016
Mailing Address 1932 Wynnton Rd		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Memo Item Transaction ID : BD4C095726CD04A58B87
City Columbus	State GA	
Zip Code 31999-0001	Purpose of Disbursement Refund	Category/ Type 010
Candidate Name AFLAC, Inc. PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Airline Pilots Assoc Int'l PAC		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1625 Massachusetts Ave NW		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Refund	<input type="checkbox"/> Memo Item
Candidate Name Airline Pilots Assoc Int'l PAC	Category/Type 010	Transaction ID : B845E0D6430D7435FA22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. UBS Americas Inc. PAC		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1501 K St NW Ste 1100		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20005-1410	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name UBS Americas Inc. PAC	Category/Type 010	Transaction ID : BF2384BFC0F9E4C2AAAA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) c. Kevin McCarthy for Congress		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address PO Box 12667		Amount of Each Disbursement this Period 2000.00
City Bakersfield	State CA	
Zip Code 93389-2667	Purpose of Disbursement Refund: Refund	<input type="checkbox"/> Memo Item
Candidate Name Kevin Mccarthy	Category/Type 010	Transaction ID : B4C95B27C4A5B4322881
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 23		

SUBTOTAL of Disbursements This Page (optional)	9500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Property Casualty Insurers Assoc. PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 2600 S River Rd		Amount of Each Disbursement this Period 5000.00
City Des Plaines State IL Zip Code 60018-3203	Purpose of Disbursement Refund: Refund <input type="checkbox"/> 010 Category/Type	
Candidate Name Property Casualty Insurers Assoc. PAC		<input type="checkbox"/> Memo Item Transaction ID : B67138E8EEF59485DB6E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Manufactured Housing Institute Pac		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 2111 Wilson Blvd Ste 100		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22201-3088	Purpose of Disbursement Refund: Refund <input type="checkbox"/> 010 Category/Type	
Candidate Name Manufactured Housing Institute Pac		<input type="checkbox"/> Memo Item Transaction ID : BC29A886800A348E6866
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Purpose of Disbursement	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: _____ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	27500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. John B Amos Cancer Center		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1831 5th Ave		Amount of Each Disbursement this Period 1000.00
City Columbus State GA Zip Code 31904-8915	Purpose of Disbursement Donation <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 012	Transaction ID : B8FE58B3EEE36406BB81
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Republican Leadership of Georgia		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2016
Mailing Address PO Box 550755		Amount of Each Disbursement this Period 500.00
City Atlanta State GA Zip Code 30355-3255	Purpose of Disbursement Contribution <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 011	Transaction ID : B7C7EF211B3784A6B97D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Matt Brass For State Senate		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016
Mailing Address PO Box 1313		Amount of Each Disbursement this Period 500.00
City Newnan State GA Zip Code 30264-1313	Purpose of Disbursement Contribution (State Committee) <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type 011	Transaction ID : B787F67A854FC458EABB
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Westmoreland For Congress

Full Name (Last, First, Middle Initial) A. Matt Brass For State Senate			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2016	
Mailing Address PO Box 1313			Amount of Each Disbursement this Period 500.00	
City Newnan	State GA	Zip Code 30264-1313	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution (State Committee)		Category/ Type 011	Transaction ID : B9232C9B894C84927998	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Marty Smith for Chairman			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016	
Mailing Address 197 Westbrook Rd			Amount of Each Disbursement this Period 1000.00	
City Carrollton	State GA	Zip Code 30116-6482	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Contribution (State Committee)		Category/ Type 011	Transaction ID : B8580E4EDF9714B0B81C	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	3500.00