

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

Neugebauer Congressional Committee

ADDRESS (number and street)

PO Box 54175

Check if different than previously reported. (ACC)

Lubbock

TX

79453-4175

2. FEC IDENTIFICATION NUMBER

C C00384016

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

TX

19

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X

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 07 / 01 / 2014

through

M M / D D / Y Y Y Y 09 / 30 / 2014

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

Type or Print Name of Treasurer Regina Kelley Johnston

Signature of Treasurer Regina Kelley Johnston

[Electronically Filed]

Date

M M / D D / Y Y Y Y 10 / 15 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Neugebauer Congressional Committee**

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))....	196755.23	1498849.84
(b) Total Contribution Refunds (from Line 20(d)) .....	500	5755
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	196255.23	1493094.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	104642.73	1497184.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	148.75	1776.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	104493.98	1495408.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	774463.58	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**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

Write or Type Committee Name

**Neugebauer Congressional Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28475	544459.3
(ii) Unitemized.....	1370	25274.48
(iii) TOTAL of contributions from individuals ▶	29845	569733.78
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	166910.23	929116.06
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	196755.23	1498849.84
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	2029.34
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	148.75	1776.17
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	694.75	4471.32
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	197598.73	1507126.67

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	104642.73	1497184.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	32050
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500	5755
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500	5755
21. OTHER DISBURSEMENTS .....	66150	154294.27
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	171292.73	1689283.5

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	748157.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	197598.73
25. SUBTOTAL (add Line 23 and Line 24).....	945756.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	171292.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	774463.58

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

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

FOR LINE NUMBER: PAGE 5 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Trevor L. Ahlberg**

Mailing Address 1901 Gateway Drive  
Suite 200

City Irving State TX Zip Code 75038-2425

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

Name of Employer Cottonwood Financial Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19306**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Mark I. Bass**

Mailing Address 3310 20th Street

City Lubbock State TX Zip Code 79410-1412

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

Name of Employer Pennington Bass & Associates Occupation Financial Planner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : A-CF19270**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ralph A. Beadle**

Mailing Address 6101 90th Street

City Lubbock State TX Zip Code 79424-0835

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

Name of Employer Self-Employed Occupation Insurance Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF19183**

Amount of Each Receipt this Period  
**250**

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

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

**3100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Dee Buchanan**

Mailing Address 2604 Valley Drive

City Alexandria State VA Zip Code 22302-2843

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

Name of Employer Ogilvy Gov. Relations Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 09 / 2014**

**Transaction ID : A-CF19121**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry M. Crews**

Mailing Address 8930 Sedgemoor Drive

City Tomball State TX Zip Code 77375-5156

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

Name of Employer Energy Quest Management, LLC Occupation Chief Operating Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : A-CF19238**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address PO Box 1301

City Great Falls State VA Zip Code 22066

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

Name of Employer Daly Consulting Group Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : A-CF19319**

Amount of Each Receipt this Period  
**500**

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

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

**3600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Tommy Fondren**

Mailing Address 107 Harrison Avenue

City Lorenzo State TX Zip Code 79343-2625

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19138**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James A. Gibbs**

Mailing Address 4925 Greenville Avenue Suite 1220

City Dallas State TX Zip Code 75206-4015

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

Name of Employer Five States Energy Co, LLC Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19307**

Amount of Each Receipt this Period  
**125**

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

Mailing Address 1304 Chancel Place

City Alexandria State VA Zip Code 22314-4707

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

Name of Employer Ogilvy Government Relations Occupation Government Relations Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19352**

Amount of Each Receipt this Period  
**500**

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

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

**875.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond L. Gilder**

Mailing Address **PO Box 187**

City **De Leon** State **TX** Zip Code **76444-0187**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19139**

Amount of Each Receipt this Period  
**500**

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

Mailing Address **1765 Lakeshore Drive**

City **Abilene** State **TX** Zip Code **79602-5204**

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

Name of Employer **Abilene Christian University** Occupation **Professor of Finance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19354**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address **4501 15th Street**

City **Lubbock** State **TX** Zip Code **79416-4809**

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

Name of Employer **Lydick-Hooks Roofing** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 10 / 2014**

**Transaction ID : A-CF19125**

Amount of Each Receipt this Period  
**300**

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

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

**1800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jon R. Jones**

Mailing Address **PO Box 2530**

City **Albany** State **TX** Zip Code **76430-8025**

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

Name of Employer **Jones Management Corporation** Occupation **Oil Distributor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19190**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George R. Keeling**

Mailing Address **PO Drawer K-1630**

City **Levelland** State **TX** Zip Code **79336**

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

Name of Employer **George R. Keeling Insurance** Occupation **Insurance Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19188**

Amount of Each Receipt this Period  
**500**

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

Mailing Address **7303 Peter Place**

City **McLean** State **VA** Zip Code **22102-2153**

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

Name of Employer **Arnold & Porter LLP** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : A-CF19286**

Amount of Each Receipt this Period  
**500**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Richard J. Leidl**

Mailing Address 7304 Durbin Terrace

City: Bethesda State: MD Zip Code: 20817-6127

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

Name of Employer: Richard Leidl, PC Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 4700

Date of Receipt: 08 / 06 / 2014

**Transaction ID : A-CF19200**

Amount of Each Receipt this Period: 1000

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

Mailing Address 7304 Durbin Terrace

City: Bethesda State: MD Zip Code: 20817-6127

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

Name of Employer: Richard Leidl, PC Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 4700

Date of Receipt: 09 / 25 / 2014

**Transaction ID : A-CF19316**

Amount of Each Receipt this Period: 600

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

Mailing Address 1515 O Street NW Apt. 206

City: Washington State: DC Zip Code: 20005-5514

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

Name of Employer: Ally Financial, Inc. Occupation: Chief Public Policy Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 09 / 18 / 2014

**Transaction ID : A-CF19291**

Amount of Each Receipt this Period: 500

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Ryan J. Lindsey**

Mailing Address 5008 Lockwood Drive

City State Zip Code  
Waco TX 76710-1621

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

Name of Employer Occupation  
Old Castle Materials Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19133**

Amount of Each Receipt this Period  
**500**

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

Mailing Address PO Box 899

City State Zip Code  
Graham TX 76450-0899

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19189**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Walter L. Lukken**

Mailing Address 650 Massachusetts Avenue NE

City State Zip Code  
Washington DC 20002-6575

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

Name of Employer Occupation  
Futures Industry Association President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19134**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James R. Lupton**

Mailing Address 4307 92nd Street

City Lubbock State TX Zip Code 79423-2911

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

Name of Employer Glass Control, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : A-CF19164**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 4902 Andros Drive

City Tampa State FL Zip Code 33629-4802

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

Name of Employer AMSCOT Financial, Inc. Occupation Chairman & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19351**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 7983 Caruth Court

City Dallas State TX Zip Code 75225-8136

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

Name of Employer Pitts Oil Co. Occupation Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : A-CF19308**

Amount of Each Receipt this Period  
**200**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Milton L. McNeely**

Mailing Address 2495 East FM 1151

City Amarillo State TX Zip Code 79118

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

Name of Employer Independent Investment Corp. Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : A-CF19287**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Frances C. Mills**

Mailing Address 1922 Crescent Place

City Midland State TX Zip Code 79705-6407

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : A-CF19135**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John O'Rourke**

Mailing Address 11028 Stanmore Drive

City Potomac State MD Zip Code 20854-1525

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

Name of Employer Law Offices of John O'Rourke Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : A-IF19143**

Amount of Each Receipt this Period  
**650**  
 Inkind: Fundraising fee

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

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

**1900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. George R. Rogers**

Mailing Address 1201 S Eads Street

City State Zip Code  
Arlington VA 22202-2812

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

Name of Employer Occupation  
Wexler and Walker President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19292**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 16251 Dallas Parkway

City State Zip Code  
Addison TX 75001-6801

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

Name of Employer Occupation  
Mary Kay Cosmetics Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19333**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John R. Smith**

Mailing Address 6425 Foster Road

City State Zip Code  
Ropesville TX 79358-5505

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

Name of Employer Occupation  
Smith Farms Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF19171**

Amount of Each Receipt this Period  
**100**

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

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

**1100.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Thomas**

Mailing Address **PO Box 387**

City **Breckenridge** State **TX** Zip Code **76424-0387**

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

Name of Employer **Delta Oil & Gas** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19137**

Amount of Each Receipt this Period  
**500**

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

Mailing Address **1429 Sweetbriar Circle**

City **Odessa** State **TX** Zip Code **79761-3429**

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

Name of Employer **Todd, Barron, Thomason & Hudma** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 10 / 2014**

**Transaction ID : A-CF19124**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Justin N Trail**

Mailing Address **301 S 3rd Street**

City **Albany** State **TX** Zip Code **76430-2580**

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

Name of Employer **Commercial Ins. Group LP** Occupation **Insurance**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 14 / 2014**

**Transaction ID : A-CF19221**

Amount of Each Receipt this Period  
**2600**

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

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

**3200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Tamara Trail**

Mailing Address PO Box 2011

City Albany State TX Zip Code 76430-8000

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

Name of Employer Self Employed Occupation Independent Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2014**

**Transaction ID : A-CF19220**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Fred A. Underwood**

Mailing Address PO Box 16606

City Lubbock State TX Zip Code 79490-6606

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

Name of Employer The Trinity Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 03 / 2014**

**Transaction ID : A-CF19112**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John B. Walker**

Mailing Address 7 Pine Grove Circle

City Houston State TX Zip Code 77024-3022

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

Name of Employer EnerVest, Ltd. Occupation Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19187**

Amount of Each Receipt this Period  
**1000**

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

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

**4600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffery M. Walter**

Mailing Address PO Box 7061

City: Alexandria State: VA Zip Code: 22307-0061

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

Name of Employer: Capitol Counsel LLC Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 09 / 30 / 2014

**Transaction ID : A-CF19353**

Amount of Each Receipt this Period: **500**

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

Mailing Address 2516 Clearspring Drive N

City: Irving State: TX Zip Code: 75063-3163

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

Name of Employer: US-MX Chamber of Commerce Occupation: President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 09 / 30 / 2014

**Transaction ID : A-CF19334**

Amount of Each Receipt this Period: **500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**1000.00**

**28475.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ACA International (AC PAC)**

Mailing Address 4040 W 70th Street

City Minneapolis State MN Zip Code 55435-4104

FEC ID number of contributing federal political committee. **C** C00034785

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

**Transaction ID : A-CF19131**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Ace Group Holdings, Inc. Political Action Committee**

Mailing Address 436 Walnut Street # WAO4P

City Philadelphia State PA Zip Code 19106-3703

FEC ID number of contributing federal political committee. **C** C00348938

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : A-CF19216**

Amount of Each Receipt this Period  
 2000

**C.** Full Name (Last, First, Middle Initial)  
**Aegon USA, LLC/Transamerica Corporation PAC**

Mailing Address 1001 Pennsylvania Avenue NW Suite 500A S

City Washington State DC Zip Code 20004-2576

FEC ID number of contributing federal political committee. **C** C00236414

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19349**

Amount of Each Receipt this Period  
 2000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Aircraft Owners & Pilots Association PAC (AOPA PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701-4756

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19198**

Amount of Each Receipt this Period  
 1000

**B. American Bakers Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1300 I Street NW Suite 700 West

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00016386**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19201**

Amount of Each Receipt this Period  
 1500

**C. American Bankers Association PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **9000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19199**

Amount of Each Receipt this Period  
 2500

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19347**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**American Express Company Political Action Committee (AXPPAC)**

Mailing Address 801 Pennsylvania Avenue NW  
Suite 650

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19305**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**American Financial Services Association PAC**

Mailing Address 919 18th Street NW  
Suite 300

City Washington State DC Zip Code 20006-5526

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF19182**

Amount of Each Receipt this Period  
 2500

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**American Meat Institute Political Action Committee**

Mailing Address 1150 Connecticut Avenue NW  
Suite 1200

City Washington State DC Zip Code 20036-4126

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19289**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 27 / 2014

**Transaction ID : A-CF19246**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**American Motorcyclist Political Action Committee**

Mailing Address 13515 Yarmouth Drive

City Pickerington State OH Zip Code 43147-8214

FEC ID number of contributing federal political committee. **C** C00120238

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : A-CF19318**

Amount of Each Receipt this Period  
500

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Appraisal Institute Political Action Committee**

Mailing Address 2600 Virginia Avenue NW  
Suite 123

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00144261

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19337**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Arnold & Porter Llp Partners Political Action Committee**

Mailing Address 555 12th Street NW

City Washington State DC Zip Code 20004-1200

FEC ID number of contributing federal political committee. **C** C00216895

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19304**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Bank of America Corporation Federal PAC**

Mailing Address 1455 Pennsylvania Avenue NW  
Suite 950

City Washington State DC Zip Code 20004-1043

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : A-CF19213**

Amount of Each Receipt this Period  
2500

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

A. Full Name (Last, First, Middle Initial)  
**Bhfs-E, Pc Pac (brownstein Hyatt Farber Schreck Political Action Committee)**

Mailing Address 410 17th Street  
Suite 2200

City State Zip Code  
Denver CO 80202-4432

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 31 2014

**Transaction ID : A-CF19181**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 6820 Lyndon B Johnson Freeway

City State Zip Code  
Dallas TX 75240-6511

FEC ID number of contributing federal political committee. **C C00241851**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 553.09

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 23 2014

**Transaction ID : A-IF19309**

Amount of Each Receipt this Period  
 410.23  
 Inkind: Catering

C. Full Name (Last, First, Middle Initial)  
**Brooke Holdings LLC & Jackson National Life Insurance Company SSF (Jackson National PAC)**

Mailing Address 1 Corporate Way

City State Zip Code  
Lansing MI 48951-1001

FEC ID number of contributing federal political committee. **C C00254953**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 31 2014

**Transaction ID : A-CF19178**

Amount of Each Receipt this Period  
 1000

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

2410.23

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 113	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Cardtronics Inc PAC (CATM-PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3250 Briarpark Drive  
 Suite 400  
 City Houston State TX Zip Code 77042-4462  
 FEC ID number of contributing federal political committee. **C C00553495**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : A-CF19346**  
 Amount of Each Receipt this Period  
 1000

**B. Chesapeake Energy Corporation Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 18496  
 City Oklahoma City State OK Zip Code 73154-0496  
 FEC ID number of contributing federal political committee. **C C00389288**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014  
**Transaction ID : A-CF19303**  
 Amount of Each Receipt this Period  
 3500

**C. Chicago Board Options Exchange PAC (CBOE PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 South LaSalle Street  
 City Chicago State IL Zip Code 60605  
 FEC ID number of contributing federal political committee. **C C00040659**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014  
**Transaction ID : A-CF19180**  
 Amount of Each Receipt this Period  
 2000

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CME Group, Inc. PAC**

Mailing Address 20 S Wacker Drive

City Chicago State IL Zip Code 60606-7431

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19302**

Amount of Each Receipt this Period  
**1500**

**B.** Full Name (Last, First, Middle Initial)  
**Compass Bancshares, Inc. PAC (BancPAC)**

Mailing Address PO Box 10566

City Birmingham State AL Zip Code 35296-0001

FEC ID number of contributing federal political committee. **C C00142596**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19197**

Amount of Each Receipt this Period  
**4000**

**C.** Full Name (Last, First, Middle Initial)  
**CONSUMER CREDIT INSURANCE ASSOCIATION DBA CONSUMER CREDIT INDUSTRY ASSOC PAC (CCIA PAC)**

Mailing Address 6300 Powers Ferry Road Suite 600-286

City Atlanta State GA Zip Code 30339-2919

FEC ID number of contributing federal political committee. **C C00550483**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : A-CF19310**

Amount of Each Receipt this Period  
**1000**

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

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

**6500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**CULAC The PAC of Credit Union National Association**

Mailing Address 601 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014

**Transaction ID : A-CF19127**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 3500

**B. Full Name (Last, First, Middle Initial)**  
**Dean Foods Company Political Action Committee**

Mailing Address 2515 McKinney Avenue  
Suite 1200

City	State	Zip Code
Dallas	TX	75201-2099

FEC ID number of contributing federal political committee. **C** C00340083

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19196**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000

**C. Full Name (Last, First, Middle Initial)**  
**Deere & Company Political Action Committee (John Deere PAC)**

Mailing Address 1 John Deere Place

City	State	Zip Code
Moline	IL	61265-8010

FEC ID number of contributing federal political committee. **C** C00204099

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : A-CF19217**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000

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

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

\_\_\_\_\_ 9500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Ernst & Young Political Action Committee**

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : A-CF19311**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**FMR, LLC Political Action Committee - Federal (Fidelity PAC)**

Mailing Address 82 Devonshire Street

City Boston State MA Zip Code 02109-3605

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF19179**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Guardian Life Insurance Company Of America Political Action Committee (guardian Life Pac)**

Mailing Address 7 Hanover Square  
C O Edward Kane

City New York State NY Zip Code 10004-2616

FEC ID number of contributing federal political committee. **C C00173393**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19345**

Amount of Each Receipt this Period  
**1000**

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

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

**7000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Halliburton Company Political Action Committee (HALPAC)**

Mailing Address 801 17th Street NW  
10th Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : A-CF19281**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**Hartford Financial Services Group Inc Federal Pac The Aka Hartford Advocates Federal Fund**

Mailing Address 1 Hartford Plaza  
# HO-1-11

City Hartford State CT Zip Code 06155-0001

FEC ID number of contributing federal political committee. **C** C00511444

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : A-CF19312**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**HSBC North America Political Action Committee (H-PAC)**

Mailing Address 1401 I Street NW  
Suite 250

City Washington State DC Zip Code 20005-6553

FEC ID number of contributing federal political committee. **C** C00033423

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : A-CF19218**

Amount of Each Receipt this Period  
 2000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**Independent Insurance Agents & Brokers of America PAC**

Mailing Address 412 1st Street SE  
Suite 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 10 / 2014**

**Transaction ID : A-CF19128**

Amount of Each Receipt this Period  
**4000**

**B. Full Name (Last, First, Middle Initial)**  
**Intercontinental Exchange, Inc. PAC**

Mailing Address 2100 RiverEdge Parkway  
Suite 500

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C C00443168**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 17 / 2014**

**Transaction ID : A-CF19141**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address 1201 15th Street NW  
Suite 300

City Washington State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C C00246306**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 04 / 2014**

**Transaction ID : A-CF19267**

Amount of Each Receipt this Period  
**1000**

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

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

**7500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**LPL Financial Corporation PAC**

Mailing Address 1 Beacon Street  
Floor 22

City Boston State MA Zip Code 02108-3106

FEC ID number of contributing federal political committee. **C** C00486217

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19194**

Amount of Each Receipt this Period  
1500

**B.** Full Name (Last, First, Middle Initial)  
**Lubbock Apartment Association PAC**

Mailing Address 4227 85th Street

City Lubbock State TX Zip Code 79423-1931

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : A-CF19215**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Metlife, Inc. Employees' Political Participation Fund A**

Mailing Address 1095 Avenue Of The Americas

City New York State NY Zip Code 10036-6797

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19344**

Amount of Each Receipt this Period  
4000

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Monsanto Company Citizenship Fund**

Mailing Address 800 N Lindbergh Boulevard

City Saint Louis State MO Zip Code 63167-1000

FEC ID number of contributing federal political committee. **C** C00042069

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19343**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Morgan Stanley Political Action Committee**

Mailing Address 1585 Broadway Floor 9

City New York State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19202**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mortgage Bankers Association Political Action Committee (MORPAC)**

Mailing Address 1717 Rhode Island Avenue NW Suite 400

City Washington State DC Zip Code 20036-3023

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19301**

Amount of Each Receipt this Period  
 2500

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 33 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. National Association of Health Underwriters (NAHU) PAC (HU PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1212 New York Avenue NW  
 Suite 1100  
 City Washington State DC Zip Code 20005-3987  
 FEC ID number of contributing federal political committee. **C C00283135**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014  
**Transaction ID : A-CF19214**  
 Amount of Each Receipt this Period  
 1000

**B. National Association of Mutual Insurance Companies PAC (NAMIC PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3601 Vincennes Road  
 City Indianapolis State IN Zip Code 46268-1154  
 FEC ID number of contributing federal political committee. **C C00170258**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2014  
**Transaction ID : A-CF19129**  
 Amount of Each Receipt this Period  
 5000

**C. National Association of Realtors Political Action Committee (RPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 North Michigan Avenue  
 City Chicago State IL Zip Code 60611-4011  
 FEC ID number of contributing federal political committee. **C C00030718**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : A-CF19266**  
 Amount of Each Receipt this Period  
 1000

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Association Political Action Committee (NBWA PAC)**

Mailing Address 1101 King Street  
Suite 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19342**

Amount of Each Receipt this Period  
5000

**B.** Full Name (Last, First, Middle Initial)  
**National Cattlemen's Beef Association Political Action Committee (NCBA-PAC)**

Mailing Address 9110 E Nichols Avenue

City Centennial State CO Zip Code 80112-3450

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19290**

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**National Corn Growers Association NCGA PAC (CornPAC)**

Mailing Address 20 F Street NW  
Suite 600

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00376343

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF19174**

Amount of Each Receipt this Period  
1000

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. National Rifle Association of America (NRA) Political Victory Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 11250 Waples Mill Road

City Fairfax	State VA	Zip Code 22030-6003
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		25		2014

**Transaction ID : A-CF19317**

Amount of Each Receipt this Period  
1000

**B. Nationwide Mutual Insurance Company Financial & Investments PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Nationwide Plaza

City Columbus	State OH	Zip Code 43215-2226
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00406215

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		21		2014

**Transaction ID : A-CF19239**

Amount of Each Receipt this Period  
2000

**C. New York Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 51 Madison Avenue  
Room 1109

City New York	State NY	Zip Code 10010-1603
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00158881

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		30		2014

**Transaction ID : A-CF19336**

Amount of Each Receipt this Period  
4500

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**NextEra Energy PAC**

Mailing Address 700 Universe Boulevard

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF19175**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Nomura Holding America, Inc. PAC**

Mailing Address 1101 Pennsylvania Avenue NW Suite 515

City Washington State DC Zip Code 20004-2528

FEC ID number of contributing federal political committee. **C C00491951**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19300**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Nomura Holding America, Inc. PAC**

Mailing Address 1101 Pennsylvania Avenue NW Suite 515

City Washington State DC Zip Code 20004-2528

FEC ID number of contributing federal political committee. **C C00491951**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : A-CF19341**

Amount of Each Receipt this Period  
1500

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**Occidental Petroleum Corporation Political Action Committee (OXY PAC)**

Mailing Address 10889 Wilshire Boulevard

City Los Angeles State CA Zip Code 90024-4201

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : A-CF19136**

Amount of Each Receipt this Period  
 3000

**B. Full Name (Last, First, Middle Initial)**  
**Oldcastle Materials Inc. Pac**

Mailing Address 101 CONSTITUTION AVENUE  
600 W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00346353**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19298**

Amount of Each Receipt this Period  
 1000

**C. Full Name (Last, First, Middle Initial)**  
**Options Clearing Corporation PAC**

Mailing Address 1 North Wacker Drive  
Suite 500

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C C00255877**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 17 / 2014

**Transaction ID : A-CF19142**

Amount of Each Receipt this Period  
 1000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

A. Full Name (Last, First, Middle Initial)  
**PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 700 Newport Center Drive  
City Newport Beach State CA Zip Code 92660-6307

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **5000**

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19339**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address 2323 Victory Avenue Suite 1400  
City Dallas State TX Zip Code 75219-7695

FEC ID number of contributing federal political committee. **C C00482125**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **7500**

Date of Receipt  
M M / D D / Y Y Y Y  
**08 / 27 / 2014**

**Transaction ID : A-CF19245**

Amount of Each Receipt this Period  
**2500**

C. Full Name (Last, First, Middle Initial)  
**Portland Cement Association Inc. Pca Pac**

Mailing Address 500 New Jersey Avenue NW Floor 7  
City Washington State DC Zip Code 20001-2066

FEC ID number of contributing federal political committee. **C C00237065**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF19177**

Amount of Each Receipt this Period  
**1000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**PricewaterhouseCoopers Political Action Committee (PwC PAC)**

Mailing Address 1301 K Street NW  
Suite 800

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19299**

Amount of Each Receipt this Period  
**2500**

**B. Full Name (Last, First, Middle Initial)**  
**Primerica Inc Political Action Committee (primerica Pac)**

Mailing Address 3120 Breckinridge Boulevard

City Duluth State GA Zip Code 30099-4900

FEC ID number of contributing federal political committee. **C C00521914**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19297**

Amount of Each Receipt this Period  
**1500**

**C. Full Name (Last, First, Middle Initial)**  
**Principal Life Insurance Company Political Action Committee**

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50392-0001

FEC ID number of contributing federal political committee. **C C00128918**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19193**

Amount of Each Receipt this Period  
**1000**

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

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

**5000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**Property Casualty Insurers Association of America PAC (PCIPAC)**

Mailing Address 2600 S River Road

City Des Plaines State IL Zip Code 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19296**

Amount of Each Receipt this Period  
 5000

**B. Full Name (Last, First, Middle Initial)**  
**Protective Life Corporation Federal Pac**

Mailing Address PO Box 2606

City Birmingham State AL Zip Code 35202-2606

FEC ID number of contributing federal political committee. **C** C00161414

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A-CF19192**

Amount of Each Receipt this Period  
 1000

**C. Full Name (Last, First, Middle Initial)**  
**Quicken Loans, Inc. PAC**

Mailing Address 101 S Washington Square Suite 620

City Lansing State MI Zip Code 48933-1708

FEC ID number of contributing federal political committee. **C** C00388827

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : A-CF19280**

Amount of Each Receipt this Period  
 1000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 113	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Radian Group, Inc. PAC**

Mailing Address 1601 Market Street

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00302166

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : A-CF19295**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Rent A Center Good Government Political Action Committee**

Mailing Address 5501 Headquarters Drive

City Plano State TX Zip Code 75024-5837

FEC ID number of contributing federal political committee. **C** C00410324

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : A-CF19335**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Securities Industry & Financial Markets Association PAC (SIFMA-PAC)**

Mailing Address 1101 New York Avenue NW  
Floor 8

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 24 / 2014

**Transaction ID : A-CF19165**

Amount of Each Receipt this Period  
1000

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Full Name (Last, First, Middle Initial)**  
**Securities Industry & Financial Markets Association PAC (SIFMA-PAC)**

Mailing Address 1101 New York Avenue NW  
Floor 8

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19191**

Amount of Each Receipt this Period  
**1000**

**B. Full Name (Last, First, Middle Initial)**  
**State Farm Mututal Automobile Insurance Company Federal PAC**

Mailing Address 1 State Farm Plaza

City Bloomington State IL Zip Code 61710-0001

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 11 / 2014**

**Transaction ID : A-CF19278**

Amount of Each Receipt this Period  
**2500**

**C. Full Name (Last, First, Middle Initial)**  
**Teachers Insurance Annuity Assoc Of America College Retirement Equities Fund Pac Tiaa-Cref**

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 800

City Washington State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : A-CF19163**

Amount of Each Receipt this Period  
**2500**

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

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

**6000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 113	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial)  
Teachers Insurance Annuity Assoc Of America College Retirement Equities Fund Pac Tiaa-Cref

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 800

City Washington State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2014

**Transaction ID : A-CF19314**

Amount of Each Receipt this Period  
1500

Full Name (Last, First, Middle Initial)  
**Texas Corn PAC of the Corn Producers Association of Texas**

Mailing Address 4205 North Interstate 27

City Lubbock State TX Zip Code 79403-7507

FEC ID number of contributing federal political committee. **C** C00503847

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2014

**Transaction ID : A-CF19176**

Amount of Each Receipt this Period  
500

Full Name (Last, First, Middle Initial)  
**The Charles Schwab Corporation PAC**

Mailing Address 211 Main Street

City San Francisco State CA Zip Code 94105-1905

FEC ID number of contributing federal political committee. **C** C00370114

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2014

**Transaction ID : A-CF19313**

Amount of Each Receipt this Period  
2000

**SUBTOTAL** of Receipts This Page (optional)..... 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**The Hartford Advocates Fund**

Mailing Address 690 Asylum Avenue

City Hartford State CT Zip Code 06115

FEC ID number of contributing federal political committee. **C C00168864**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-CF19195**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Trans Union Corporation Political Action Committee**

Mailing Address 555 W Adams Street

City Chicago State IL Zip Code 60661-3719

FEC ID number of contributing federal political committee. **C C00313700**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : A-CF19294**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Union Pacific Corporation Fund for Effective Government**

Mailing Address 600 13th Street NW  
Suite 340

City Washington State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19338**

Amount of Each Receipt this Period  
**1000**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A. Unum Group Political Action Committee (UnumPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 2211 Congress Street

City Portland State ME Zip Code 04122-0002

FEC ID number of contributing federal political committee. **C** C00177436

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : A-CF19293**

Amount of Each Receipt this Period  
 1000

**B. US Bancorp Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 Nicollet Mall # BC-MN-H210

City Minneapolis State MN Zip Code 55402-7000

FEC ID number of contributing federal political committee. **C** C00488882

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : A-CF19315**

Amount of Each Receipt this Period  
 2500

**C. USAA Employee PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 9800 Fredericksburg Road

City San Antonio State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2014

**Transaction ID : A-CF19268**

Amount of Each Receipt this Period  
 5000

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Wells Fargo & Company Employee PAC**

Mailing Address **Sixth And Marquette**

City **Minneapolis** State **MN** Zip Code **55479-0001**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : A-CF19340**

Amount of Each Receipt this Period  
**3000**

**B.** Full Name (Last, First, Middle Initial)  
**Xcel Energy Employee PAC**

Mailing Address **1800 Larimer Street  
Floor 1600**

City **Denver** State **CO** Zip Code **80202-1408**

FEC ID number of contributing federal political committee. **C C00107771**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 11 / 2014**

**Transaction ID : A-CF19277**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**4000.00**

**166910.23**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**The Wickers Group**

Mailing Address 1819 Polk Street  
# 373

City San Francisco State CA Zip Code 94109-3003

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
903.9

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : A-OF19279**

Amount of Each Receipt this Period  
148.75

Media Buy Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

148.75

148.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**City Bank of Texas**

Mailing Address 611 University Avenue

City	State	Zip Code
Lubbock	TX	79401-2285

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**774.29**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : A-MF19378**

Amount of Each Receipt this Period  
**259.16**

Interest

**B.** Full Name (Last, First, Middle Initial)  
**First Bank & Trust Co.**

Mailing Address 7806 Indiana Avenue

City	State	Zip Code
Lubbock	TX	79423-1806

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**914.79**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 18 / 2014**

**Transaction ID : A-MF19272**

Amount of Each Receipt this Period  
**92.46**

Interest

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

Mailing Address 400 Pine Street

City	State	Zip Code
Abilene	TX	79601-5108

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**204.95**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 03 / 2014**

**Transaction ID : A-MF19203**

Amount of Each Receipt this Period  
**8.44**

Interest

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

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

**360.06**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**First Financial Bank Abilene**

Mailing Address 400 Pine Street

City Abilene State TX Zip Code 79601-5108

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
204.95

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

**Transaction ID : A-MF19273**

Amount of Each Receipt this Period  
8.72

Interest

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

Mailing Address 400 Pine Street

City Abilene State TX Zip Code 79601-5108

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
204.95

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : A-MF19379**

Amount of Each Receipt this Period  
8.73

Interest

**C.** Full Name (Last, First, Middle Initial)  
**First National Bank of Albany**

Mailing Address 100 South Main Street

City Albany State TX Zip Code 76430-2575

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
509.51

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : A-MF19377**

Amount of Each Receipt this Period  
63.96

Interest

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

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

81.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**First State Bank of Graham**

Mailing Address 1526 4th Street

City	State	Zip Code
Graham	TX	76450-2909

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**432.74**

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

**Transaction ID : A-MF19118**

Amount of Each Receipt this Period  
**17.31**

Interest

**B.** Full Name (Last, First, Middle Initial)  
**First State Bank of Graham**

Mailing Address 1526 4th Street

City	State	Zip Code
Graham	TX	76450-2909

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**432.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : A-MF19233**

Amount of Each Receipt this Period  
**17.89**

Interest

**C.** Full Name (Last, First, Middle Initial)  
**First State Bank of Graham**

Mailing Address 1526 4th Street

City	State	Zip Code
Graham	TX	76450-2909

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**432.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2014**

**Transaction ID : A-MF19288**

Amount of Each Receipt this Period  
**17.9**

Interest

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

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

**53.10**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Texas Mutual Insurance Company**

Mailing Address PO Box 64790

City Lubbock State TX Zip Code 79464-4790

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**217.05**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-MF19173**

Amount of Each Receipt this Period  
**112.52**

Dividend income

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

Mailing Address 5701 82nd Street

City Lubbock State TX Zip Code 79424-2633

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**296.94**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2014**

**Transaction ID : A-MF19119**

Amount of Each Receipt this Period  
**10.65**

Interest

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

Mailing Address 5701 82nd Street

City Lubbock State TX Zip Code 79424-2633

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**296.94**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-MF19234**

Amount of Each Receipt this Period  
**11**

Interest

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>134.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Neugebauer Congressional Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Western Bank**

Mailing Address 5701 82nd Street

City Lubbock State TX Zip Code 79424-2633

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**296.94**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 / 01 / 2014**

**Transaction ID : A-MF19380**

Amount of Each Receipt this Period  
**11.01**

Interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**11.01**

**639.75**

**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 53 OF 113	
	<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)  
**Neugebauer Congressional Committee**

**A. Abilene Chamber of Commerce**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2281

City Abilene State TX Zip Code 79604-2281

Purpose of Disbursement Program Expense - Banquet Tickets

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 100

Transaction ID : B-E-19263

Category/Type: 001

**B. Allen Financial Agency, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 4415 66th Street Suite 101

City Lubbock State TX Zip Code 79414

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 15 / 2014

Amount of Each Disbursement this Period: 1278

Transaction ID : B-E-19155

Original vendors exceeding reporting threshold itemized as memo transactions.

Category/Type: 001

**c. Chanda Allen**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 54175

City Lubbock State TX Zip Code 79453-4175

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 15 / 2014

Amount of Each Disbursement this Period: 1278

Transaction ID : B-S-7519

[MEMO ITEM]  
Subitemization of Allen Financial Agency, Inc.(07/15/14)

Category/Type:

**SUBTOTAL** of Disbursements This Page (optional)..... 1378.00

**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 54 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Allen Financial Agency, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 4415 66th Street Suite 101		Amount of Each Disbursement this Period 1278 <b>Transaction ID : B-E-19204</b>
City Lubbock	State TX Zip Code 79414	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chanda Allen</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 1278 <b>Transaction ID : B-S-7523</b>
City Lubbock	State TX Zip Code 79453-4175	
Purpose of Disbursement Salary	Category/Type	<b>[MEMO ITEM]</b> Subitemization of Allen Financial Agency, Inc.(07/28/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Allen Financial Agency, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 4415 66th Street Suite 101		Amount of Each Disbursement this Period 1278 <b>Transaction ID : B-E-19223</b>
City Lubbock	State TX Zip Code 79414	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2556.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Chanda Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 1278
City Lubbock	State TX	
Zip Code 79453-4175	Purpose of Disbursement Salary	[MEMO ITEM] Subitemization of Allen Financial Agency, Inc.(08/11/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Allen Financial Agency, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 4415 66th Street Suite 101		Amount of Each Disbursement this Period 1278
City Lubbock	State TX	
Zip Code 79414	Purpose of Disbursement SEE MEMO ITEMS	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chanda Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 1278
City Lubbock	State TX	
Zip Code 79453-4175	Purpose of Disbursement Salary	[MEMO ITEM] Subitemization of Allen Financial Agency, Inc.(08/25/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1278.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Allen Financial Agency, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 4415 66th Street Suite 101			Amount of Each Disbursement this Period 1338.95	
City Lubbock	State TX	Zip Code 79414	Transaction ID : B-E-19328	
Purpose of Disbursement SEE MEMO ITEMS		Category/Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Chanda Allen</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address PO Box 54175			Amount of Each Disbursement this Period 1278	
City Lubbock	State TX	Zip Code 79453-4175	Transaction ID : B-S-7573	
Purpose of Disbursement Salary		Category/Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Subitemization of Allen Financial Agency, Inc.(09/08/14)	
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Ms. Stephanie Addison</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address PO Box 54175			Amount of Each Disbursement this Period 60.95	
City Lubbock	State TX	Zip Code 79453-4175	Transaction ID : B-S-7574	
Purpose of Disbursement Salary		Category/Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Subitemization of Allen Financial Agency, Inc.(09/08/14)	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1338.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Allen Financial Agency, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 4415 66th Street Suite 101		Amount of Each Disbursement this Period 1435.9
City Lubbock	State TX Zip Code 79414	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-19329</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. Chanda Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 1278
City Lubbock	State TX Zip Code 79453-4175	
Purpose of Disbursement Salary	Category/Type	<b>Transaction ID : B-S-7575</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Allen Financial Agency, Inc.(09/22/14)

Full Name (Last, First, Middle Initial) <b>c. Ms. Stephanie Addison</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 157.9
City Lubbock	State TX Zip Code 79453-4175	
Purpose of Disbursement Salary	Category/Type	<b>Transaction ID : B-S-7576</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Allen Financial Agency, Inc.(09/22/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1435.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial)  
**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 2907.51

Transaction ID : B-E-19208

Original vendors exceeding reporting threshold itemized as memo transactions.

Category/Type: 001

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

Mailing Address 1601 S California Avenue

City Palo Alto State CA Zip Code 94304-1111

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 899.29

Transaction ID : B-S-7535

[MEMO ITEM]  
Subitemization of American Express(08/06/14)

Category/Type:

Full Name (Last, First, Middle Initial)  
**c. Texas Tech Club**

Mailing Address 2508 Sixth Street

City Lubbock State TX Zip Code 79409

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 160.89

Transaction ID : B-S-7540

[MEMO ITEM]  
Subitemization of American Express(08/06/14)

Category/Type:

**SUBTOTAL** of Disbursements This Page (optional)..... 2907.51

**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 59 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 800 Market Street 7th Floor		Amount of Each Disbursement this Period 0.00
City San Francisco	State CA	Zip Code 94102
Purpose of Disbursement Transportation	Category/Type	
Candidate Name	Transaction ID : B-S-7526	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Google Ad Words</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 2.29
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Advertising	Category/Type	
Candidate Name	Transaction ID : B-S-7534	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. VerticalResponse</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 50 Beale Street		Amount of Each Disbursement this Period 46
City San Fransico	State CA	Zip Code 94105
Purpose of Disbursement Email Marketing	Category/Type	
Candidate Name	Transaction ID : B-S-7549	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Enlightened Technology Group, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 17000 Dallas Parkway Suite 104		Amount of Each Disbursement this Period 28.75
City Dallas	State TX	
Zip Code 75248-1944	Purpose of Disbursement Software Service	[MEMO ITEM] Subitemization of American Express(08/06/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dropbox</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 4440 El Camino Real		Amount of Each Disbursement this Period 9.99
City Los Altos	State CA	
Zip Code 94022	Purpose of Disbursement Software Service	[MEMO ITEM] Subitemization of American Express(08/06/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Five Guys Enterprises, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 10440 Furnace Road Suite 205		Amount of Each Disbursement this Period 138.76
City Lorton	State VA	
Zip Code 22079	Purpose of Disbursement Meal Expense	[MEMO ITEM] Subitemization of American Express(08/06/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 61 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 450
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Service	
Candidate Name	Category/Type	Transaction ID : B-S-7541  [MEMO ITEM] Subitemization of American Express(08/06/14)
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nemaocolin Woodlands Resort</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1001 Lafayette Drive		Amount of Each Disbursement this Period 376.5
City Farmington State PA Zip Code 15437-9754	Purpose of Disbursement Lodging	
Candidate Name	Category/Type	Transaction ID : B-S-7529  [MEMO ITEM] Subitemization of American Express(08/06/14)
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lubbock Avalanche-Journal</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 710 Avenue J		Amount of Each Disbursement this Period 0.99
City Lubbock State TX Zip Code 79401-1808	Purpose of Disbursement Subscription	
Candidate Name	Category/Type	Transaction ID : B-S-7538  [MEMO ITEM] Subitemization of American Express(08/06/14)
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

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

**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 62 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 163.7
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	Transaction ID : B-S-7550
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Accurate Word, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 1765		Amount of Each Disbursement this Period 119.95
City White Plains	State MD	
Zip Code 20695-1765	Purpose of Disbursement Printing	Transaction ID : B-S-7539
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adobe, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 25.46
City San Jose	State CA	
Zip Code 95110-2704	Purpose of Disbursement Software Service	Transaction ID : B-S-7546
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 641
City Dallas	State TX	
Zip Code 75261-0000	Purpose of Disbursement Airfare	Transaction ID : B-S-7531
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 88.65
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Postage	Transaction ID : B-S-7533
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Go Daddy.com</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address Domain Names/Hosting Service 14455 N. Hayden Rd., Suite 219		Amount of Each Disbursement this Period -1677.27
City Scottsdale	State AZ	
Zip Code 85260-6947	Purpose of Disbursement Refund for overpayment	Transaction ID : B-S-7552
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. WebpageDomainNames.com</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 14455 North Hayden Road Suite 226		Amount of Each Disbursement this Period 103.87
City Scottsdale	State AZ	
Zip Code 85260-6993	Purpose of Disbursement Domain Name Registrations	Transaction ID : B-S-7536
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amazon.com</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1 Centerpoint Boulevard		Amount of Each Disbursement this Period 35.09
City New Castle	State DE	
Zip Code 19720-4172	Purpose of Disbursement Office Supplies	Transaction ID : B-S-7551
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Texas Tech Alumni Association</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 45001		Amount of Each Disbursement this Period 1000
City Lubbock	State TX	
Zip Code 79409-5001	Purpose of Disbursement Table Registration for Event	Transaction ID : B-S-7537
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/06/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 113			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		29		2014
M M	/	D D	/	Y Y Y Y									
08		29		2014									
Mailing Address PO Box 1270			Amount of Each Disbursement this Period <table border="1"> <tr> <td>6839.32</td> </tr> </table>	6839.32									
6839.32													
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : B-E-19252										
Purpose of Disbursement SEE MEMO ITEMS		Category/Type 001											
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.										
Office Sought: House Senate President	State: District:												

Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		29		2014
M M	/	D D	/	Y Y Y Y									
08		29		2014									
Mailing Address 800 Market Street 7th Floor			Amount of Each Disbursement this Period <table border="1"> <tr> <td>84.75</td> </tr> </table>	84.75									
84.75													
City San Francisco	State CA	Zip Code 94102	Transaction ID : B-S-7631										
Purpose of Disbursement Transportation		Category/Type											
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/29/14)										
Office Sought: House Senate President	State: District:												

Full Name (Last, First, Middle Initial) <b>c. Google Ad Words</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		29		2014
M M	/	D D	/	Y Y Y Y									
08		29		2014									
Mailing Address 1600 Amphitheatre Parkway			Amount of Each Disbursement this Period <table border="1"> <tr> <td>294.53</td> </tr> </table>	294.53									
294.53													
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : B-S-7638										
Purpose of Disbursement Advertising		Category/Type											
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/29/14)										
Office Sought: House Senate President	State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>6839.32</td> </tr> </table>	6839.32
6839.32		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 66 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 929.98
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement Advertising	Transaction ID : B-S-7639
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>B. Congressional Prayer Caucus Foundation, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 15095		Amount of Each Disbursement this Period 500
City Chesapeake	State VA	
Zip Code 23328-5095	Purpose of Disbursement Car Window Clings	Transaction ID : B-S-7641
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>c. The Funky Door</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 6045 82nd Street # 2		Amount of Each Disbursement this Period 1558.21
City Lubbock	State TX	
Zip Code 79424-3678	Purpose of Disbursement Catering	Transaction ID : B-S-7646
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. The Funky Door</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 6045 82nd Street # 2		Amount of Each Disbursement this Period 46
City Lubbock	State TX Zip Code 79424-3678	
Purpose of Disbursement Meal Expense	Candidate Name	Transaction ID : B-S-7651
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>B. Market Street #543</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 4205 98th Street		Amount of Each Disbursement this Period 100.21
City Lubbock	State TX Zip Code 79423-3971	
Purpose of Disbursement Door Prizes	Candidate Name	Transaction ID : B-S-7645
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>c. Cypress Street Station</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 158 Cypress Street		Amount of Each Disbursement this Period 13
City Abilene	State TX Zip Code 79601-5817	
Purpose of Disbursement Meal Expense	Candidate Name	Transaction ID : B-S-7636
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Subitemization of American Express(08/29/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 11.65
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Postage	Transaction ID : B-S-7642
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>B. Royal Coach Towne Car Service</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 1917 49th Street		Amount of Each Disbursement this Period 36
City Lubbock	State TX	
Zip Code 79412-2247	Purpose of Disbursement Transportation	Transaction ID : B-S-7635
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

Full Name (Last, First, Middle Initial) <b>c. Enlightened Technology Group, Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 17000 Dallas Parkway Suite 104		Amount of Each Disbursement this Period 28.75
City Dallas	State TX	
Zip Code 75248-1944	Purpose of Disbursement Web Hosting	Transaction ID : B-S-7643
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of American Express(08/29/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 450
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Service	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7644</b> <b>[MEMO ITEM]</b> Subitemization of American Express(08/29/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 175.1
City Dallas State TX Zip Code 75261-0000	Purpose of Disbursement Airfare	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7632</b> <b>[MEMO ITEM]</b> Subitemization of American Express(08/29/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Metro Self Storage</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 3103 50th Street		Amount of Each Disbursement this Period 1867.5
City Lubbock State TX Zip Code 79413	Purpose of Disbursement Storage Rental	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7647</b> <b>[MEMO ITEM]</b> Subitemization of American Express(08/29/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

**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 70 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Hilton Garden Inn Abilene</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 4449 Ridgemoor Drive		Amount of Each Disbursement this Period 500.12
City Abilene	State TX	
Zip Code 79606	Purpose of Disbursement Lodging	Transaction ID : B-S-7649
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/29/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dropbox</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 4440 El Camino Real		Amount of Each Disbursement this Period 9.99
City Los Altos	State CA	
Zip Code 94022	Purpose of Disbursement Software Service	Transaction ID : B-S-7637
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/29/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. VerticalResponse</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 50 Beale Street		Amount of Each Disbursement this Period 46
City San Fransico	State CA	
Zip Code 94105	Purpose of Disbursement Email Marketing	Transaction ID : B-S-7650
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(08/29/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 7951.18
City Newark	State NJ	
Zip Code 07101-1270	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-19326</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 1601 S California Avenue		Amount of Each Disbursement this Period 930.29
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-7605</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Amphora Bakery</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 294 Sunset Park Drive		Amount of Each Disbursement this Period 254.73
City Herndon	State VA	
Zip Code 20170-5219	Purpose of Disbursement Catering	<b>Transaction ID : B-S-7614</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7951.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 800 Market Street 7th Floor		Amount of Each Disbursement this Period ..... 23
City San Francisco	State CA	
Zip Code 94102	Purpose of Disbursement Transportation	<b>Transaction ID : B-S-7599</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Apple Store</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1961 Chain Bridge Road Suite 8087		Amount of Each Disbursement this Period ..... 95.35
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement Telecommunication Equipment	<b>Transaction ID : B-S-7600</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google Ad Words</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period ..... 288.69
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement Advertising	<b>Transaction ID : B-S-7604</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Congressional Prayer Caucus Foundation, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 15095		Amount of Each Disbursement this Period 1000
City Chesapeake	State VA	Zip Code 23328-5095
Purpose of Disbursement Car Window Clings	Category/Type	
Candidate Name	Transaction ID : B-S-7615	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Market Street #543</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 4205 98th Street		Amount of Each Disbursement this Period 114.2
City Lubbock	State TX	Zip Code 79423-3971
Purpose of Disbursement Food & Beverage for Fundraiser	Category/Type	
Candidate Name	Transaction ID : B-S-7607	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 77896		Amount of Each Disbursement this Period 3061.4
City Washington	State DC	Zip Code 20013-8896
Purpose of Disbursement Catering	Category/Type	
Candidate Name	Transaction ID : B-S-7616	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Imprint.com</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 4850 Wright Road Suite 100		Amount of Each Disbursement this Period 1220.47
City Stafford	State TX	
Zip Code 77477	Purpose of Disbursement Printing	<b>Transaction ID : B-S-7613</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VerticalResponse</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 50 Beale Street		Amount of Each Disbursement this Period 46
City San Fransico	State CA	
Zip Code 94105	Purpose of Disbursement Email Marketing	<b>Transaction ID : B-S-7617</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dropbox</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 4440 El Camino Real		Amount of Each Disbursement this Period 9.99
City Los Altos	State CA	
Zip Code 94022	Purpose of Disbursement Software Service	<b>Transaction ID : B-S-7603</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period 141.27
City Washington	State DC Zip Code 20002-4214	
Purpose of Disbursement Postage	Category/Type	<b>Transaction ID : B-S-7602</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle International, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 450
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Software Service	Category/Type	<b>Transaction ID : B-S-7611</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Enlightened Technology Group, Inc</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 17000 Dallas Parkway Suite 104		Amount of Each Disbursement this Period 28.75
City Dallas	State TX Zip Code 75248-1944	
Purpose of Disbursement Software Service	Category/Type	<b>Transaction ID : B-S-7612</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of American Express(09/26/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Market Street</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 3405 50th Street		Amount of Each Disbursement this Period 78.39
City Lubbock	State TX	
Zip Code 79413-4001	Purpose of Disbursement Donor Gifts & Mementos	[MEMO ITEM] Subitemization of American Express(09/26/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 10.74
City Baton Rouge	State LA	
Zip Code 70801-1315	Purpose of Disbursement E-Merchant Fee	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 20.29
City Baton Rouge	State LA	
Zip Code 70801-1315	Purpose of Disbursement E-Merchant fee	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 10.05 <b>Transaction ID : B-E-19184</b>
City Baton Rouge	State LA	
Zip Code 70801-1315	Purpose of Disbursement E-Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 2.44 <b>Transaction ID : B-E-19185</b>
City Baton Rouge	State LA	
Zip Code 70801-1315	Purpose of Disbursement E-Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 10.05 <b>Transaction ID : B-E-19271</b>
City Baton Rouge	State LA	
Zip Code 70801-1315	Purpose of Disbursement E-Merchant Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	22.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 59.1 <b>Transaction ID : B-E-19285</b>
City Baton Rouge	State LA Zip Code 70801-1315	
Purpose of Disbursement E-Merchant Fee	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 214 3rd Street Suite 2B		Amount of Each Disbursement this Period 19.8 <b>Transaction ID : B-E-19320</b>
City Baton Rouge	State LA Zip Code 70801-1315	
Purpose of Disbursement E-Merchant Fee	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 145.08 <b>Transaction ID : B-E-19151</b>
City Atlanta	State GA Zip Code 30348	
Purpose of Disbursement Telephone Service	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	223.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 355.62
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-19274</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address PO Box 105414		Amount of Each Disbursement this Period 275.9
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-19381</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 519.72
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-19207</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1151.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 475.85
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-19253</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 1113.02
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-19321</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Benchmark</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2014
Mailing Address 1607 Broadway		Amount of Each Disbursement this Period 102.71
City Lubbock	State TX	
Zip Code 79401-3120	Purpose of Disbursement Copier Maintenance	<b>Transaction ID : B-E-19283</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1691.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Brinker International PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 6820 Lyndon B Johnson Freeway		Amount of Each Disbursement this Period 410.23 <b>Transaction ID : B-I-19309</b>
City Dallas State TX Zip Code 75240-6511	Purpose of Disbursement Inkind: Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 3124.12 <b>Transaction ID : B-E-19114</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expenses, Catering	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1186.97 <b>Transaction ID : B-E-19209</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expenses	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4721.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 418.11 <b>Transaction ID : B-E-19262</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expenses Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eastland Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 209 West Main Street Suite A		Amount of Each Disbursement this Period 220 <b>Transaction ID : B-E-19224</b>
City Eastland State TX Zip Code 76448-2723	Purpose of Disbursement Membership Dues Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EFTPS Enrollment Processing Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 173788		Amount of Each Disbursement this Period 637.63 <b>Transaction ID : B-E-19154</b>
City Denver State CO Zip Code 80217-3788	Purpose of Disbursement Payroll Tax Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1275.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. EFTPS Enrollment Processing Center</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 173788		Amount of Each Disbursement this Period 425.09 <b>Transaction ID : B-E-19240</b>
City Denver	State CO	
Purpose of Disbursement Payroll Tax		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EFTPS Enrollment Processing Center</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 173788		Amount of Each Disbursement this Period 425 <b>Transaction ID : B-E-19284</b>
City Denver	State CO	
Purpose of Disbursement Payroll Tax		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Epiphany Productions</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5070.21 <b>Transaction ID : B-E-19094</b>
City Alexandria	State VA	
Purpose of Disbursement Consulting - Fundraising		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5920.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Epiphany Productions</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5095.63 <b>Transaction ID : B-E-19170</b>
City Alexandria	State VA	
Zip Code 22301-1015	Purpose of Disbursement Consulting - Fundraising	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5150.29 <b>Transaction ID : B-E-19243</b>
City Alexandria	State VA	
Zip Code 22301-1015	Purpose of Disbursement Consulting - Fundraising	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Epiphany Productions</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5050.54 <b>Transaction ID : B-E-19322</b>
City Alexandria	State VA	
Zip Code 22301-1015	Purpose of Disbursement Consulting - Fundraising	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15296.46
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 147.3 <b>Transaction ID : B-E-19156</b>
City Dallas	State TX	
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 32.63 <b>Transaction ID : B-E-19250</b>
City Dallas	State TX	
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gober Hilgers, PLLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2250 <b>Transaction ID : B-E-19144</b>
City Dallas	State TX	
Purpose of Disbursement Legal & Compliance Services	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2429.93
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers, PLLC</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2286.42 <b>Transaction ID : B-E-19210</b>
City Dallas State TX Zip Code 75201	Purpose of Disbursement Legal & Compliance services Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers, PLLC</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2255.05 <b>Transaction ID : B-E-19282</b>
City Dallas State TX Zip Code 75201	Purpose of Disbursement Legal & Compliance Services Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lilly &amp; Company</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 10751.4 <b>Transaction ID : B-E-19146</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - fundraising Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15292.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 113			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Lilly &amp; Company</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-19206</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - Fundraising Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lilly &amp; Company</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 3044.92 <b>Transaction ID : B-E-19264</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - Fundraising Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Lubbock Area Republican Women</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address PO Box 6315		Amount of Each Disbursement this Period 30 <b>Transaction ID : B-E-19116</b>
City Lubbock State TX Zip Code 79493-6315	Purpose of Disbursement Program Expense - Luncheon Registration Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6074.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Lubbock County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1001 Main Street Suite 706		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-19260</b>
City Lubbock State TX Zip Code 79401-3323	Purpose of Disbursement Program Expense - Luncheon Tickets 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mastercard (Wells Fargo Remittance Center)</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address PO Box 6415		Amount of Each Disbursement this Period 4184.9 <b>Transaction ID : B-E-19168</b>
City Carol Stream State IL Zip Code 60197-6415	Purpose of Disbursement SEE MEMO ITEMS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Five Guys Enterprises, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 10440 Furnace Road Suite 205		Amount of Each Disbursement this Period 264.92 <b>Transaction ID : B-S-7563</b>
City Lorton State VA Zip Code 22079	Purpose of Disbursement Meal Expense Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4284.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Data Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 375 Riverside Parkway SW		Amount of Each Disbursement this Period ..... 25.19
City Lithia Springs	State GA	
Zip Code 30122	Purpose of Disbursement Internet Service	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. La Lomita Dos</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 308 Pennsylvania Avenue SE		Amount of Each Disbursement this Period ..... 166
City Washington	State DC	
Zip Code 20003-1147	Purpose of Disbursement Meal Expense	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. U.S. House of Representatives - Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address B-217 Longworth Building		Amount of Each Disbursement this Period ..... 62.1
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Donor Gifts/Mementos	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 90 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Stamps.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 12959 Coral Tree Place		Amount of Each Disbursement this Period 15.99
City Los Angeles	State CA Zip Code 90066	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : B-S-7553
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

Full Name (Last, First, Middle Initial) <b>B. Occasions Caterers</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 655 Taylor Street NE		Amount of Each Disbursement this Period 1519.2
City Washington	State DC Zip Code 20017	
Purpose of Disbursement Catering	Candidate Name	Transaction ID : B-S-7562
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

Full Name (Last, First, Middle Initial) <b>c. Catering by Avalon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 109 Clermont Avenue		Amount of Each Disbursement this Period 1280.53
City Alexandria	State VA Zip Code 22304	
Purpose of Disbursement Catering	Candidate Name	Transaction ID : B-S-7558
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial)  
**A. Direct TV**

Mailing Address PO Box 60036

City Los Angeles State CA Zip Code 90060-0036

Purpose of Disbursement Television Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 29 / 2014

Amount of Each Disbursement this Period: 106.22

Transaction ID : B-S-7554

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

Full Name (Last, First, Middle Initial)  
**B. United States Postal Service**

Mailing Address 50 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 29 / 2014

Amount of Each Disbursement this Period: 34.9

Transaction ID : B-S-7565

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

Full Name (Last, First, Middle Initial)  
**c. Tortilla Coast**

Mailing Address 400 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 29 / 2014

Amount of Each Disbursement this Period: 290.09

Transaction ID : B-S-7559

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

**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 92 OF 113	
	<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)  
**Neugebauer Congressional Committee**

**A. Prospice Networks**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 64805

City Lubbock State TX Zip Code 79464-4805

Purpose of Disbursement  
Telecommunications Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 29 / 2014

Amount of Each Disbursement this Period  
231.02

Transaction ID : B-S-7556

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

**B. Uber**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 Market Street  
7th Floor

City San Francisco State CA Zip Code 94102

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
07 / 29 / 2014

Amount of Each Disbursement this Period  
25

Transaction ID : B-S-7567

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(07/29/14)

**C. Mastercard (Wells Fargo Remittance Center)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6415

City Carol Stream State IL Zip Code 60197-6415

Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
08 / 29 / 2014

Amount of Each Disbursement this Period  
2292.29

Transaction ID : B-E-19248

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional)..... 2292.29

**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 93 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial)  
**A. AT&T Data Center**

Mailing Address 375 Riverside Parkway SW

City Lithia Springs State GA Zip Code 30122

Purpose of Disbursement Internet Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 25.19

Transaction ID : B-S-7593

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)

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

Mailing Address 12959 Coral Tree Place

City Los Angeles State CA Zip Code 90066

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 15.99

Transaction ID : B-S-7586

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)

Full Name (Last, First, Middle Initial)  
**c. Tortilla Coast**

Mailing Address 400 1st Street SE

City Washington State DC Zip Code 20003-1826

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 33.7

Transaction ID : B-S-7594

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)

**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 94 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Direct TV</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 60036		Amount of Each Disbursement this Period 000,000.00 106.22
City Los Angeles	State CA	
Zip Code 90060-0036	Purpose of Disbursement Television Service	Transaction ID : B-S-7587
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dish Network</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address Department 63		Amount of Each Disbursement this Period 000,000.00 323.16
City Palatine	State IL	
Zip Code 60055-0001	Purpose of Disbursement Television Service	Transaction ID : B-S-7597
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Amphora Bakery</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 294 Sunset Park Drive		Amount of Each Disbursement this Period 000,000.00 33.07
City Herndon	State VA	
Zip Code 20170-5219	Purpose of Disbursement Meal Expense	Transaction ID : B-S-7596
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 113	
	<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)  
**Neugebauer Congressional Committee**

**A. Prospice Networks**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 64805

City Lubbock State TX Zip Code 79464-4805

Purpose of Disbursement  
Telecommunications Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 84.78

Transaction ID : B-S-7589

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)

**B. Bearnaise**

Full Name (Last, First, Middle Initial)  
Mailing Address 315 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 1510.6

Transaction ID : B-S-7595

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(08/29/14)

**C. Mastercard (Wells Fargo Remittance Center)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6415

City Carol Stream State IL Zip Code 60197-6415

Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 26 / 2014

Amount of Each Disbursement this Period: 2188.58

Transaction ID : B-E-19327

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional)..... 2188.58

**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 96 OF 113	
	<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)  
**Neugebauer Congressional Committee**

**A. Sonoma Restaurant**

Full Name (Last, First, Middle Initial)  
Mailing Address 223 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 26 / 2014

Amount of Each Disbursement this Period: 665

Transaction ID : B-S-7628

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)

**B. Stamps.com**

Full Name (Last, First, Middle Initial)  
Mailing Address 12959 Coral Tree Place

City Los Angeles State CA Zip Code 90066

Purpose of Disbursement Monthly Subscription Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 26 / 2014

Amount of Each Disbursement this Period: 15.99

Transaction ID : B-S-7619

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)

**C. Millers Professional Imaging**

Full Name (Last, First, Middle Initial)  
Mailing Address 610 East Jefferson

City Pittsburg State KS Zip Code 66762

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 26 / 2014

Amount of Each Disbursement this Period: 20

Transaction ID : B-S-7622

**[MEMO ITEM]**  
Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)

**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 97 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Sitzes Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 3617 Dub Wright Boulevard		Amount of Each Disbursement this Period ..... 13
City Abilene State TX Zip Code 79606-1613	Purpose of Disbursement Key for Storage Unit	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7618</b>  <b>[MEMO ITEM]</b> Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period ..... 25.19
City Carol Stream State IL Zip Code 60197-6463	Purpose of Disbursement Internet Service	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7625</b>  <b>[MEMO ITEM]</b> Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 50 Massachusetts Avenue NE		Amount of Each Disbursement this Period ..... 5.32
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Postage	
Candidate Name	Category/Type	<b>Transaction ID : B-S-7623</b>  <b>[MEMO ITEM]</b> Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 98 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Direct TV</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address PO Box 60036		Amount of Each Disbursement this Period 63.49
City Los Angeles	State CA	
Zip Code 90060-0036	Purpose of Disbursement Television Service	Transaction ID : B-S-7620
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Barrel</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 613 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 945.92
City Washington	State DC	
Zip Code 20003-4330	Purpose of Disbursement Catering	Transaction ID : B-S-7630
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Prospice Networks</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address PO Box 64805		Amount of Each Disbursement this Period 84.78
City Lubbock	State TX	
Zip Code 79464-4805	Purpose of Disbursement Telecommunications Service	Transaction ID : B-S-7624
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Amphora Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 294 Sunset Park Drive		Amount of Each Disbursement this Period 600.00
City Herndon	State VA	
Zip Code 20170-5219	Purpose of Disbursement Meal Expense	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Apple Store</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1961 Chain Bridge Road Suite 8087		Amount of Each Disbursement this Period 322.19
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement Cell Phone Repair	[MEMO ITEM] Subitemization of Mastercard (Wells Fargo Remittance Center)(09/26/14)
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Oaks Professional Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 4415 66th Street Suite 107		Amount of Each Disbursement this Period 600.00
City Lubbock	State TX	
Zip Code 79414-4811	Purpose of Disbursement Office Rent	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Oaks Professional Center</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 4415 66th Street Suite 107		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-19211</b>
City Lubbock State TX Zip Code 79414-4811	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Oaks Professional Center</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 4415 66th Street Suite 107		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-19259</b>
City Lubbock State TX Zip Code 79414-4811	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Premier Media Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 6011 43rd Street		Amount of Each Disbursement this Period 2255.72 <b>Transaction ID : B-E-19265</b>
City Lubbock State TX Zip Code 79407-3712	Purpose of Disbursement Campaign Signs 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3455.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Red Right Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address PO Box 600254			Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-19158</b>
City Dallas	State TX	Zip Code 75360-0254	
Purpose of Disbursement Digital Communication	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Red Right Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO Box 600254			Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-19254</b>
City Dallas	State TX	Zip Code 75360-0254	
Purpose of Disbursement Digital Communication	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Red Right Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address PO Box 600254			Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-19382</b>
City Dallas	State TX	Zip Code 75360-0254	
Purpose of Disbursement Digital Communication	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Republican Congressional Spouses Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 6207 30th Street North		Amount of Each Disbursement this Period 50 <b>Transaction ID : B-E-19261</b>
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement Program Expense - Luncheon Registration	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Republican Women's Federal Forum</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 3571		Amount of Each Disbursement this Period 32 <b>Transaction ID : B-E-19257</b>
City Merrifield	State VA	
Zip Code 22116-3571	Purpose of Disbursement Program Expense- Luncheon Registration	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Seminole Area Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 1198		Amount of Each Disbursement this Period 50 <b>Transaction ID : B-E-19148</b>
City Seminole	State TX	
Zip Code 79360-1198	Purpose of Disbursement Booth Registration	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	132.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Sitzes Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 3617 Dub Wright Boulevard		Amount of Each Disbursement this Period 342 <b>Transaction ID : B-E-19157</b>
City Abilene	State TX	
Zip Code 79606-1613	Purpose of Disbursement Storage Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Sweetwater Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 1148		Amount of Each Disbursement this Period 45 <b>Transaction ID : B-E-19324</b>
City Sweetwater	State TX	
Zip Code 79556-1148	Purpose of Disbursement Program Expense - Banquet Ticket	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Switch I.T. Support</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 4415 66th Street Suite 111		Amount of Each Disbursement this Period 289.51 <b>Transaction ID : B-E-19227</b>
City Lubbock	State TX	
Zip Code 79414-4811	Purpose of Disbursement Computer Maintenance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	676.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Switch I.T. Support</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 4415 66th Street Suite 111		Amount of Each Disbursement this Period 224.56 <b>Transaction ID : B-E-19251</b>
City Lubbock State TX Zip Code 79414-4811	Purpose of Disbursement Computer Maintenance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Thomas Graphics, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address PO Box 142226		Amount of Each Disbursement this Period 2054.95 <b>Transaction ID : B-E-19145</b>
City Austin State TX Zip Code 78714-2226	Purpose of Disbursement Mail Processing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Thomas Graphics, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address PO Box 142226		Amount of Each Disbursement this Period 3154.22 <b>Transaction ID : B-E-19325</b>
City Austin State TX Zip Code 78714-2226	Purpose of Disbursement Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5433.73
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Ms. Stephanie Addison</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 36 <b>Transaction ID : B-E-19231</b>
City Lubbock	State TX	
Zip Code 79453-4175	Purpose of Disbursement Administrative Work at Fundraiser	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Chanda Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 33.6 <b>Transaction ID : B-E-19149</b>
City Lubbock	State TX	
Zip Code 79453-4175	Purpose of Disbursement Mileage reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Chanda Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 196 <b>Transaction ID : B-E-19230</b>
City Lubbock	State TX	
Zip Code 79453-4175	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	265.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 113			
	<input checked="" type="checkbox"/> 17 <input 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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 611 Pennsylvania Avenue SE #395		Amount of Each Disbursement this Period 211.68 <b>Transaction ID : B-E-19150</b>
City Washington State DC Zip Code 20003-4303	Purpose of Disbursement Mileage Reimbursement Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dana Neugebauer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 611 Pennsylvania Avenue SE #395		Amount of Each Disbursement this Period 95.4 <b>Transaction ID : B-E-19169</b>
City Washington State DC Zip Code 20003-4303	Purpose of Disbursement Reim - Gift for Campaign Staff Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Neiman Marcus</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 2255 International Drive		Amount of Each Disbursement this Period 95.4 <b>Transaction ID : B-S-7521</b>
City McLean State VA Zip Code 22102-3911	Purpose of Disbursement Gift for Campaign Staff Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Dana Neugebauer(07/29/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	307.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 611 Pennsylvania Avenue SE #395		Amount of Each Disbursement this Period 127.84
City Washington	State DC Zip Code 20003-4303	
Purpose of Disbursement Reim. - Transportation	Category/Type 001	<b>Transaction ID : B-E-19232</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dana Neugebauer</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address 611 Pennsylvania Avenue SE #395		Amount of Each Disbursement this Period 474.01
City Washington	State DC Zip Code 20003-4303	
Purpose of Disbursement Reim. - Fuel, Airfare	Category/Type 001	<b>Transaction ID : B-E-19256</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 61961		Amount of Each Disbursement this Period 464.4
City Dallas	State TX Zip Code 75261-0000	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : B-S-7569</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Dana Neugebauer(09/02/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	601.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Dana Neugebauer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 611 Pennsylvania Avenue SE #395		Amount of Each Disbursement this Period 233.24
City Washington State DC Zip Code 20003-4303	Purpose of Disbursement Reim - Transportation Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-19323  Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hertz Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1250 West Mockingbird Lane		Amount of Each Disbursement this Period 233.24
City Dallas State TX Zip Code 75247-4902	Purpose of Disbursement Transportation Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-S-7572  [MEMO ITEM] Subitemization of Dana Neugebauer(09/26/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Honorable Randy Neugebauer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 162.9
City Lubbock State TX Zip Code 79453	Purpose of Disbursement Reim-Flags Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-19159  Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	396.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Architect of the Capitol</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address US Capitol Building Room HT-12		Amount of Each Disbursement this Period 46.99
City Washington	State DC	
Zip Code 20510-0001	Purpose of Disbursement Flags	Transaction ID : B-S-7520
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Randy Neugebauer(07/25/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Honorable Randy Neugebauer</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO Box 54175		Amount of Each Disbursement this Period 40.78
City Lubbock	State TX	
Zip Code 79453	Purpose of Disbursement Reim. - Meal Expense	Transaction ID : B-E-19275
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Texas Tech Club</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 2508 Sixth Street		Amount of Each Disbursement this Period 0
City Lubbock	State TX	
Zip Code 79409	Purpose of Disbursement Meal Expense	Transaction ID : B-S-7571
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Randy Neugebauer(08/06/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Mr. John O'Rourke</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 16 / 2014</b>
Mailing Address 11028 Stanmore Drive		Amount of Each Disbursement this Period <b>650</b>
City Potomac	State MD	
Zip Code 20854-1525	Purpose of Disbursement Inkind: Fundraising fee	<b>Transaction ID : B-I-19143</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>104141.95</b>

**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 111 OF 113			
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. Delta Oil &amp; Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO Box 387		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-19104</b>
City Breckenridge	State TX Zip Code 76424-0387	
Purpose of Disbursement Contribution Refund	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

**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 112 OF 113	
	<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)  
**Neugebauer Congressional Committee**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 24 / 2014</b>
Mailing Address <b>320 1st Street SE</b>		Amount of Each Disbursement this Period <b>65150</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement <b>Transfer</b>	<b>Transaction ID : B-E-19167</b>
Candidate Name <b>National Republican Congressional Committee</b>	Category/Type <b>011</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Texans for Greg Abbott</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 08 / 2014</b>
Mailing Address <b>7777 Washington Avenue</b>		Amount of Each Disbursement this Period <b>1000</b>
City <b>Houston</b> State <b>TX</b> Zip Code <b>77007-1037</b>	Purpose of Disbursement <b>Campaign Contribution</b>	<b>Transaction ID : B-E-19117</b>
Candidate Name <b>Hon. Greg Abbott</b>	Category/Type <b>011</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>66150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>66150.00</b>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Neugebauer Congressional Committee**

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

**Epiphany Productions**

Nature of Debt (Purpose):  
Consulting - Fundraising

Mailing Address 104 Hume Avenue

City State Zip Code  
Alexandria VA 22301-1015

Outstanding Balance Beginning This Period

5070.21

Transaction ID : SD10-DEBT19094

Amount Incurred This Period

0

Payment This Period

5070.21

Outstanding Balance at Close of This Period

0

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

0.00

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

0.00

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

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