

# 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

Fry for Congress

ADDRESS (number and street)

P.O.Box 30

Check if different than previously reported. (ACC)

Maumee

OH

43537

2. FEC IDENTIFICATION NUMBER ▼

C C00554832

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Leslie Ann B Chambers

Signature of Treasurer

Leslie Ann B Chambers

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 28

Write or Type Committee Name

Fry for Congress

Report Covering the Period: From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	26110.72	26110.72
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26110.72	26110.72
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	19383.69	19383.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19383.69	19383.69
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>7227.03</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>500.00</b>	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Fry for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9255.00	9255.00
(ii) Unitemized.....	6187.85	6187.85
(iii) TOTAL of contributions from individuals ▶	15442.85	15442.85
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	8740.00	8740.00
(d) The Candidate.....	1927.87	1927.87
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	26110.72	26110.72
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	500.00	500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	500.00	500.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	26610.72	26610.72

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19383.69	19383.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	19383.69	19383.69

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	26610.72
25. SUBTOTAL (add Line 23 and Line 24).....	26610.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19383.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7227.03

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory Njaim**

Mailing Address 2150 N McCord Rd  
Apt 37B

City Toledo State OH Zip Code 43615-3048

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

Name of Employer Promedica Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : VNHZ7C26ZH6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6133 Whiteacre Rd

City Toledo State OH Zip Code 43615-1032

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

Name of Employer Inside Out Occupation Bookkeeper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2014

**Transaction ID : VNHZ7C26ZP5**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3054 Pebble Ct

City Maumee State OH Zip Code 43537-8930

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

Name of Employer USPS Occupation Postman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2014

**Transaction ID : VNHZ7C26ZD6**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judy Smith**

Mailing Address 3630 Strayer Rd

City Maumee State OH Zip Code 43537-9713

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

Name of Employer Unemployed Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 14 / 2014

**Transaction ID : VNHZ7C26ZR1**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 6027 Westacre Ln

City Toledo State OH Zip Code 43615-1022

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

Name of Employer Toledo Clinic Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 24 / 2014

**Transaction ID : VNHZ7C2RBD6**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 715 S Holland Sylvania Rd  
Lot 36

City Toledo State OH Zip Code 43615-6367

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

Name of Employer Huntington Bank Occupation Account Relationship Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 26 / 2014

**Transaction ID : VNHZ7C398X7**

Amount of Each Receipt this Period  
 500.00

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

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

1050.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jason Dick**

Mailing Address 4261 Stable Path Dr

City Maumee State OH Zip Code 43537-9173

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

Name of Employer General Motors Occupation Millwright

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 26 / 2014

**Transaction ID : VNHZ7C38AF6**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 6133 Whiteacre Rd

City Toledo State OH Zip Code 43615-1032

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

Name of Employer Inside Out Occupation Bookkeeper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : VNHZ7C3CYH6**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 715 S Holland Sylvania Rd  
Lot 36

City Toledo State OH Zip Code 43615-6367

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

Name of Employer Huntington Bank Occupation Account Relationship Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : VNHZ7C5YDT6**

Amount of Each Receipt this Period  
 1000.00

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

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

1550.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory Njaim**

Mailing Address 2150 N McCord Rd  
Apt 37B

City Toledo State OH Zip Code 43615-3048

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

Name of Employer Promedica Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 08 / 2014

**Transaction ID : VNHZ7C7V108**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 1780 Welsh Hills Rd

City Granville State OH Zip Code 43023-9323

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

Name of Employer RLJ Management Compay Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : VNHZ7C8ADB6**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 209 W Marina Pkwy

City Lorain State OH Zip Code 44052-2081

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

Name of Employer Self Employed Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : VNHZ7CA4NW6**

Amount of Each Receipt this Period  
250.00

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

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

2790.00



**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ginny Keck**

Mailing Address 6027 Westacre Ln

City Toledo State OH Zip Code 43615-1022

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

Name of Employer Toledo Clinic Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : VNHZ7CAABC5**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 970 S Graytown Rd

City Elmore State OH Zip Code 43416-9759

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

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

**Transaction ID : VNHZ7CAX2B8**

Amount of Each Receipt this Period  
**400.00**

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

Mailing Address 2441 Findley Ave

City Columbus State OH Zip Code 43202-2917

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 **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : VNHZ7CB4MM2**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jason Dick**

Mailing Address 4261 Stable Path Dr

City State Zip Code  
Maumee OH 43537-9173

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

Name of Employer Occupation  
General Motors Millwright

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 04 / 2014

**Transaction ID : VNHZ7CB2VE5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9861 Downing Pl

City State Zip Code  
North Huntingdon PA 15642-5625

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

Name of Employer Occupation  
Emerson Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 11 / 2014

**Transaction ID : VNHZ7CC71G6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6027 Westacre Ln

City State Zip Code  
Toledo OH 43615-1022

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

Name of Employer Occupation  
Toledo Clinic Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 20 / 2014

**Transaction ID : VNHZ7CEKKG0**

Amount of Each Receipt this Period  
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Lee**

Mailing Address 4020 Waterville Swanton Rd  
Rt. 64

City Swanton State OH Zip Code 43558-8963

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

Name of Employer Ohio Teaching Family Association Occupation Social Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : VNHZ7CFB6F4**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 715 S Holland Sylvania Rd  
Lot 36

City Toledo State OH Zip Code 43615-6367

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

Name of Employer Huntington Bank Occupation Account Relationship Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1515.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 23 / 2014

**Transaction ID : VNHZ7CFB708**

Amount of Each Receipt this Period  
15.00

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

Mailing Address 5725 Weckerly Rd

City Whitehouse State OH Zip Code 43571-9763

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  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : VNHZ7CFSGB3**

Amount of Each Receipt this Period  
250.00

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

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

765.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Neal Carothers**

Mailing Address 4 Picardie Ct

City Bowling Green State OH Zip Code 43402-1554

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

Name of Employer STRS Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : VNHZ7CGBT77**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 30110 Morningside Dr

City Perrysburg State OH Zip Code 43551-5900

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

Name of Employer Larmar Foods Inc Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : VNHZ7CGEFG7**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

750.00

9255.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Toledo Port Council PCE**

Mailing Address 1 Maritime Plz

City Toledo State OH Zip Code 43604-1853

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

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  
 02 / 26 / 2014

**Transaction ID : VNHZ7CAHTX7**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Communication Workers of America Local 4319 PCE**

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

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

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  
 03 / 09 / 2014

**Transaction ID : VNHZ7CC0AN0**

Amount of Each Receipt this Period  
 40.00

**C.** Full Name (Last, First, Middle Initial)  
**U.A. Local 50 Plumbers & Steamfitters**

Mailing Address 7570 Caple Blvd

City Northwood State OH Zip Code 43619-1084

FEC ID number of contributing federal political committee. **C** C00322784

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  
 03 / 09 / 2014

**Transaction ID : VNHZ7CC0B07**

Amount of Each Receipt this Period  
 5000.00

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

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

5140.00

**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 28
	<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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cement Masons & Plasterers, Local 886**

Mailing Address 4652 Lewis Ave

City	State	Zip Code
Toledo	OH	43612-2370

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

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  
 03 / 14 / 2014

**Transaction ID : VNHZ7CDDBN4**

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
**International Association of Heat & Frost Insulators and Asbestos Workers PAC**

Mailing Address 9602 Martin Luther King Jr Hwy

City	State	Zip Code
Lanham	MD	20706-1839

FEC ID number of contributing federal political committee. **C** C00115527

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  
 03 / 14 / 2014

**Transaction ID : VNHZ7CDD9Y9**

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sheet Metal Workers' International Association Political Action League**

Mailing Address 1750 New York Ave NW

City	State	Zip Code
Washington	DC	20006-5301

FEC ID number of contributing federal political committee. **C** C00007542

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  
 03 / 21 / 2014

**Transaction ID : VNHZ7CFB680**

Amount of Each Receipt this Period

2500.00

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

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

3600.00

8740.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 28
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 04 / 2014	
Mailing Address 4786 Violet Rd		<b>Transaction ID : VNHZ7CE6PN5</b>	
City Toledo State OH Zip Code 43623-4344	Amount of Each Receipt this Period 49.85		
FEC ID number of contributing federal political committee. <b>C H4OH05043</b>	Name of Employer Occupation Heritage Church Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 49.85		
		* In-Kind: Domain Name	

Full Name (Last, First, Middle Initial) <b>B. Robert Fry</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 08 / 2014	
Mailing Address 4786 Violet Rd		<b>Transaction ID : VNHZ7CJM0Q2</b>	
City Toledo State OH Zip Code 43623-4344	Amount of Each Receipt this Period 116.00		
FEC ID number of contributing federal political committee. <b>C H4OH05043</b>	Name of Employer Occupation Heritage Church Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 165.85		
		* In-Kind: P.O.Box	

Full Name (Last, First, Middle Initial) <b>C. Robert Fry</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 4786 Violet Rd		<b>Transaction ID : VNHZ7C3X909</b>	
City Toledo State OH Zip Code 43623-4344	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. <b>C H4OH05043</b>	Name of Employer Occupation Heritage Church Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 865.85		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	865.85
<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 16 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Fry**

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C** H4OH05043

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 915.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2014

**Transaction ID : VNHZ7CE6PP3**

Amount of Each Receipt this Period  
 49.85

\* In-Kind: Domain Name

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

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C** H4OH05043

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1019.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : VNHZ7C8QTY8**

Amount of Each Receipt this Period  
 9.80

\* In-Kind: Postage Stamps

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

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C** H4OH05043

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1019.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : VNHZ7C8QV04**

Amount of Each Receipt this Period  
 94.01

\* In-Kind: Toner & Office Supplies

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

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

153.66



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

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NAME OF COMMITTEE (In Full)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Fry**

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C H4OH05043**

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1519.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2014**

**Transaction ID : VNHZ7CB7WK4**

Amount of Each Receipt this Period  
**500.14**

\* In-Kind: Facebook Advertising

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

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C H4OH05043**

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1569.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2014**

**Transaction ID : VNHZ7CE6PX8**

Amount of Each Receipt this Period  
**49.85**

\* In-Kind: Domain Name

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

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C H4OH05043**

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1712.99**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : VNHZ7CE6NT1**

Amount of Each Receipt this Period  
**143.49**

\* In-Kind: Food and Supplies for Breakfast Event

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

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

**693.48**

**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 28
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2014
Mailing Address 4786 Violet Rd		<b>Transaction ID : VNHZ7CE7QZ5</b>
City Toledo State OH Zip Code 43623-4344	Amount of Each Receipt this Period 74.88	
FEC ID number of contributing federal political committee. <b>C H4OH05043</b>		* In-Kind: Printer
Name of Employer Heritage Church Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1787.87	

Full Name (Last, First, Middle Initial) <b>B. Robert Fry</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2014
Mailing Address 4786 Violet Rd		<b>Transaction ID : VNHZ7CJM0S8</b>
City Toledo State OH Zip Code 43623-4344	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. <b>C H4OH05043</b>		* In-Kind: Facebook Advertising
Name of Employer Heritage Church Occupation Minister		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1927.87	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City State Zip Code		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	214.88
<b>TOTAL</b> This Period (last page this line number only).....	1927.87

**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 28
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Fry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Fry**

Mailing Address 4786 Violet Rd

City Toledo State OH Zip Code 43623-4344

FEC ID number of contributing federal political committee. **C** H4OH05043

Name of Employer Heritage Church Occupation Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : VNHZ7CA0PF2**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

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 20 OF 28			
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 49.85
City Toledo	State OH Zip Code 43623-4344	
Purpose of Disbursement Domain Name	Category/Type	Transaction ID : VNHZ7CE6PN5I
Candidate Name <b>Robert Fry</b>		
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH District: 05		

Full Name (Last, First, Middle Initial) <b>B. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 116.00
City Toledo	State OH Zip Code 43623-4344	
Purpose of Disbursement P.O.Box	Category/Type	Transaction ID : VNHZ7CJM0Q2I
Candidate Name <b>Robert Fry</b>		
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH District: 05		

Full Name (Last, First, Middle Initial) <b>c. LaShae Torres</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 421 S Oak St		Amount of Each Disbursement this Period 1000.00
City Ottawa	State OH Zip Code 45875-1827	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : VNGZZ9Q4G98
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1165.85
<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 21 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 49.85
City Toledo	State OH Zip Code 43623-4344	
Purpose of Disbursement Domain Name	Category/Type	Transaction ID : VNH7ZCE6PP31
Candidate Name <b>Robert Fry</b>		
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH District: 05		

Full Name (Last, First, Middle Initial) <b>B. Leslie Ann B Chambers</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 412 Irving St Upstairs		Amount of Each Disbursement this Period 500.00
City Toledo	State OH Zip Code 43620-1753	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : VNGZZ9QRN22
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. LaShae Torres</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 421 S Oak St		Amount of Each Disbursement this Period 1500.00
City Ottawa	State OH Zip Code 45875-1827	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : VNGZZ9QRN14
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2049.85
<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 22 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 48 Grove St Ste 202		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : VNGZZ9R3JK7</b>
City Somerville State MA Zip Code 02144-2500	Purpose of Disbursement Database Software Candidate Name Category/Type 001	
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. LaShae Torres</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 421 S Oak St		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VNGZZ9R3K73</b>
City Ottawa State OH Zip Code 45875-1827	Purpose of Disbursement Salary Candidate Name Category/Type 001	
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>c. Robert Fry</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 9.80 <b>Transaction ID : VNHZ7C8QTY8I</b>
City Toledo State OH Zip Code 43623-4344	Purpose of Disbursement Postage Stamps Candidate Name Category/Type	
Office Sought: <input checked="" 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: OH District: 05	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3409.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 94.01
City Toledo	State OH	
Zip Code 43623-4344	Purpose of Disbursement Toner & Office Supplies	Transaction ID : VNHZ7C8QV041
Candidate Name <b>Robert Fry</b>	Category/Type	
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Dave Heller</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1300 NE 94th St		Amount of Each Disbursement this Period 2000.00
City Miami Shores	State FL	
Zip Code 33138-2902	Purpose of Disbursement General Campaign Consulting Fees	Transaction ID : VNGZZ9R1XD6
Candidate Name	Category/Type 001	
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>c. Robert Fry</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 500.14
City Toledo	State OH	
Zip Code 43623-4344	Purpose of Disbursement Facebook Advertising	Transaction ID : VNHZ7CB7WK41
Candidate Name <b>Robert Fry</b>	Category/Type	
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2594.15
<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 24 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 49.85
City Toledo	State OH Zip Code 43623-4344	
Purpose of Disbursement Domain Name	Category/Type	<b>Transaction ID : VNHZ7CE6PX8I</b>
Candidate Name <b>Robert Fry</b>		
Office Sought: <input checked="" 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)	* In-Kind Received
State: OH District: 05		

Full Name (Last, First, Middle Initial) <b>B. Leslie Ann B Chambers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 412 Irving St Upstairs		Amount of Each Disbursement this Period 500.00
City Toledo	State OH Zip Code 43620-1753	
Purpose of Disbursement Salary	Category/Type 001	<b>Transaction ID : VNGZZ9RDHC9</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. NGP Van, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 48 Grove St Ste 202		Amount of Each Disbursement this Period 700.00
City Somerville	State MA Zip Code 02144-2500	
Purpose of Disbursement Database Software	Category/Type 001	<b>Transaction ID : VNGZZ9RDH95</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1249.85
<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 25 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. LaShae Torres</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 421 S Oak St		Amount of Each Disbursement this Period 500.00
City Ottawa	State OH	
Zip Code 45875-1827	Purpose of Disbursement Salary	<b>Transaction ID : VNGZZ9RDHB1</b>
Candidate Name	001 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. Dave Heller</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 1300 NE 94th St		Amount of Each Disbursement this Period 4000.00
City Miami Shores	State FL	
Zip Code 33138-2902	Purpose of Disbursement General Campaign Consulting Fees	<b>Transaction ID : VNGZZ9RGSV4</b>
Candidate Name	001 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>c. LaShae Torres</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 421 S Oak St		Amount of Each Disbursement this Period 2500.00
City Ottawa	State OH	
Zip Code 45875-1827	Purpose of Disbursement Salary	<b>Transaction ID : VNGZZ9RGSX0</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7000.00
<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 26 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leslie Ann B Chambers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 412 Irving St Upstairs		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGZZ9RKHT4</b>
City Toledo State OH Zip Code 43620-1753	Purpose of Disbursement Salary Candidate Name Category/Type 001	
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. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 143.49 <b>Transaction ID : VNHZ7CE6NT11</b>
City Toledo State OH Zip Code 43623-4344	Purpose of Disbursement Food and Supplies for Breakfast Event Candidate Name Category/Type	
Office Sought: <input checked="" 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: OH District: 05	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>c. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 4786 Violet Rd		Amount of Each Disbursement this Period 74.88 <b>Transaction ID : VNHZ7CE7QZ51</b>
City Toledo State OH Zip Code 43623-4344	Purpose of Disbursement Printer Candidate Name Category/Type	
Office Sought: <input checked="" 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: OH District: 05	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	718.37
<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 27 OF 28	
	<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)  
**Fry for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Fry</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 26 / 2014</b>
Mailing Address <b>4786 Violet Rd</b>		Amount of Each Disbursement this Period <b>140.00</b>
City <b>Toledo</b> State <b>OH</b> Zip Code <b>43623-4344</b>	Category/Type	
Purpose of Disbursement <b>Facebook Advertising</b>		<b>Transaction ID : VNHZ7CJM0S8I</b>
Candidate Name <b>Robert Fry</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>OH</b> District: <b>05</b>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		* In-Kind Received

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		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>18327.87</b>

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Fry for Congress

Transaction ID : VNHZ7CA0PF2L

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Robert Fry

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
4786 Violet Rd

City State ZIP Code  
Toledo OH 43623-4344

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
500.00 0.00 500.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr)  Yes  No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 500.00  
**TOTALS** This Period (last page in this line only)..... 500.00

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