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#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3   | For An                                  | Authorized Com          | nmittee                                   | Of                        | ffice Use Only                           |
|--|---|-------------------------|---|---------------------------|--|
| NAME OF COMMITTEE (in full)                                | TYPE OR PRIN                            |                         | xample: If typing, type<br>ver the lines. | 12FE4M5                   |  |
| JOE KAUFMAN FO   | R CONGRES                               | 3                       |   |                           | I  |
|  |   |                         |   |                           |  |
|  | . 2645 EVECUE                           |                         | TE 540                                    |                           |  |
| ADDRESS (number and street)                                |   | ΓΙVE PARK DRIVE S       |   |                           |  |
| ▼ Check if different                                       |   |                         |   |                           |  |
| than previously reported. (ACC)                            | WESTON                                  |                         |   | FL 33                     | 331                                      |
| 2. FEC IDENTIFICATION                                      | I NUMBED W                              | CITY A                  |   | STATE ▲                   | ZIP CODE ▲                               |
| C C00501205  | THOMBEN V                               | 3. IS THIS<br>REPORT    | NEW (N) OR                                | AMENDED<br>(A)            | STATE ▼ DISTRICT    FL   20              |
| 4. TYPE OF REPORT  (a) Quarterly Reports:                  | (Choose One)                            | (b) 12-Day <b>PRE</b>   | E-Election Report for t                   | he:                       |  |
|  |   |                         | Primary (12P)                             | General (12G              | Runoff (12R)                             |
| April 15 Quarte  | rly Report (Q1)                         |                         | Convention (12C)                          | Special (12S)             | )  |
| July 15 Quarter  | ly Report (Q2)                          |                         | M " M / D " I                             | D / Y Y Y Y               |  |
| October 15 Qua   | arterly Report (Q3)                     | Election on             |   | , , , , ,                 | in the<br>State of                       |
| January 31 Yea   | r-End Report (YE)                       | (c) 30-Day <b>PO</b> \$ | ST-Election Report for                    | the:                      |  |
|  |   | x                       | General (30G)                             | Runoff (30R)              | Special (30S)                            |
| Termination Rep  | oort (TER)                              | Election on             | M 11 / D 06                               | 2018                      | in the FL State of                       |
| 5. Covering Period   | M M / D D D D D D D D D D D D D D D D D | 2018                    | through                                   | M M / D D / Y             | 2018                                     |
| I certify that I have examined Type or Print Name of Treas | KAUFMAN,                                |                         | nowledge and belief it                    | t is true, correct and c  | omplete.                                 |
| Signature of Treasurer                                     | KAUFMAN, JOE, , ,                       |                         | [Electronically Filed]                    | Date 12                   | 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| NOTE: Submission of false, er                              | roneous, or incomple                    | ete information may     | subject the person sign                   | ning this Report to the p | penalties of 52 U.S.C. §30109            |
| Office<br>Use<br>Only                                      |   |                         |   |                           | FEC FORM 3<br>(Revised 05/2016)          |

#### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
JOE KAUFMAN FOR CONGRESS

2018 10 2018 11 26 18 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 41050.00 159299.76 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 41050.00 159299.76 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 245838.00 495121.19 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 495121.19 245838.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 46060.39 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 89862.53 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name JOE KAUFMAN FOR CONGRESS 2018 26 2018 Report Covering the Period: From: 10 18 To: 11 I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 06 2018 07 2018 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 26 2018 Political Committees (last day of reporting period) Itemized (use Schedule A) 38475.00 141255.31 1000.00 Unitemized 2575.00 18044.45 350.00 (iii) Total of contributions from individuals 41050.00 159299.76 1350.00 Political Party Committees 0.00 0.00 0.00 Other Political Committees 0.00 0.00 0.00

#### POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 48

|     | COLUMN A<br>Total this Period                  | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) |
|-----|--|--|---|
|     | (d) The Candidate                              |  |   |
|     | 0.00   | 0.00   | 0.00  |
|     | (e) TOTAL CONTRIBUTIONS (other than lo         | ans) (add Lines 11(a)(iii), (b), (c) and (d))  |   |
|     | 41050.00                                       | 159299.76  | 1350.00   |
| 12. | TRANSFERS FROM OTHER AUTHORIZED                | COMMITTEES   |   |
|     | 0.00   | 0.00   | 0.00  |
| 13. | LOANS: (a) Made or Guaranteed by the Candidate |  |   |
|     | 0.00   | 0.00   | 0.00  |
|     | (b) All Other Loans                            |  |   |
|     | 0.00   | 0.00   | 0.00  |
|     | (c) TOTAL LOANS (add Lines 13(a) and (b))      |  |   |
|     | 0.00   | 0.00   | 0.00  |
| 14. | OFFSETS TO OPERATING EXPENDITURES              | S (Refunds, rebates, etc.)   |   |
|     | 0.00   | 0.00   | 0.00  |
| 15. | OTHER RECEIPTS (Dividends, Interest, etc.)     |  |   |
|     | 0.00   | 0.00   | 0.00  |
| 16. | TOTAL RECEIPTS (add 11(e), 12, 13(c), 14       | and 15)  |   |
|     | 41050.00                                       | 159299.76  | 1350.00   |
|     |  |  |   |

POST-ELECTION DETAILED SUMMARY PAGE Report of Receipts and Disbursements PAGE 5 / 48 FEC Form 3 (Revised 1/01) Write or Type Committee Name JOE KAUFMAN FOR CONGRESS 10 18 2018 2018 Report Covering the Period: 11 26 From: To: **II. DISBURSEMENTS COLUMN A COLUMN B COLUMN C** Total for \* (date after general election) **Total this Period** Election Cycle Total as of \* (date of general election) through \* (last day of reporting period) (\* See page 5 for date) (\* See page 5 for dates) 17. OPERATING EXPENDITURES 8567.97 245838.00 495121.19 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 0.00 0.00 0.00 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate 0.00 0.00 0.00 (b) Of All Other Loans 0.00 0.00 0.00 (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) 0.00 0.00 0.00 REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 0.00 (b) Political Party Committees

0.00

0.00

0.00

#### POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

PAGE 6 / 48

FEC Form 3 (Revised 1/01)

**COLUMN A COLUMN B** COLUMN C **Total this Period** Election Cycle Total as of \* Total for \* (date after general election) (date of general election) through \* (last day of reporting period) (\* See page 5 for date) (\* See page 5 for dates) Other Political Committees (such as PACs) 0.00 0.00 0.00 TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c)) 0.00 0.00 0.00 21. OTHER DISBURSEMENTS 0.00 0.00 0.00 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21) 245838.00 495121.19 8567.97 III. NET CONTRIBUTIONS (OTHER THAN LOANS) (Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e)) 41050.00 159299.76 1350.00 IV. NET OPERATING EXPENDITURES (Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17) 245838.00 495121.19 8567.97 V. CASH SUMMARY CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... 250848.39 41050.00 24. TOTAL RECIEPTS THIS PERIOD (from Line 16)..... 291898.39 25. SUBTOTAL (add Line 23 and Line 24)..... 245838.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) 46060.39

Receipt For:

Primary

18

✗ General

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| F  | OR               | LINE | NU | MBER: |  | PAGE |   | /  | OF | 4 | 48 |  |
|----|------------------|------|----|-------|--|------|---|----|----|---|----|--|
| (0 | (check only one) |      |    |       |  |      |   |    |    |   |    |  |
|    | ×                | 11a  |    | 11c   |  | 11   | d |    |    |   |    |  |
|    |                  | 12   |    | 13a   |  | 13h  |   | 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) BLACK, VICTORIA, , , Date of Receipt Mailing Address 15068 FM 766 2018 26 City State Zip Code Transaction ID: SA11AI.63154 TX **GONZLALES** 78629 FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date **X** General Primary 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Estrada, Anna Maria, , , Date of Receipt Mailing Address 6000 Island Blvd. 2018 Unit 1401 10 City State Zip Code Transaction ID: SA11AI.63090 Aventura FL 33160 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2300.00 Name of Employer Occupation Triangle financial services Manager Memo Item Receipt For: Election Cycle-to-Date Primary **✗** General 2300.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Estrada, Anna Maria, , , Date of Receipt Mailing Address 6000 Island Blvd. 03 2018 Unit 1401 City State Zip Code Transaction ID: SA11AI.63067 FL Aventura 33160 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2300.00 Name of Employer Occupation Triangle financial services Manager

| Other (specify) ▼                             | 4600.00     |   |   |         |  |
|---|-------------|---|---|---------|--|
| SUBTOTAL of Receipts This Page (optional)     | <b>&gt;</b> | , | , | 5600.00 |  |
| TOTAL This Period (last page this line number | only)       | 7 | , |         |  |

Election Cycle-to-Date

Memo Item

Contribution

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

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

| F  | OR               | LINE | NU | MBER: |  | PAGE |  | 8  | OF | 4 | 48 |  |
|----|------------------|------|----|-------|--|------|--|----|----|---|----|--|
| (0 | (check only one) |      |    |       |  |      |  |    |    |   |    |  |
|    | ×                | 11a  |    | 11b   |  | 11c  |  | 11 | d  |   |    |  |
|    |                  | 12   |    | 13a   |  | 13b  |  | 14 | [  |   | 15 |  |

| Any information copied from such Reports and S or for commercial purposes, other than using the  |  |  |
|--|--|--|
| NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRE   | * :  |  |
| Full Name (Last, First, Middle Initial) Florida Congressional Committee Mailing Address 6100 Hollywood Blvd. Ste. 305 City Hollywwod FEC ID number of contributing federal political committee.  | State Zip Code FL 33024  | Date of Receipt  11 03 2018  Transaction ID : SA11AI.63071  Amount of Each Receipt this Period |
| Name of Employer PAC Receipt For: 18  Primary   General Other (specify) ▼  | Occupation PAC Election Cycle-to-Date  2000.00                               | Memo Item Contribution   |
| Full Name (Last, First, Middle Initial) Florida Congressional Committee  Mailing Address 6100 Hollywood Blvd. Ste. 305  City Hollywwod  FEC ID number of contributing federal political committee.  Name of Employer PAC  Receipt For: 18  Primary General Other (specify) | State Zip Code 33024  C  Occupation PAC  Election Cycle-to-Date 4000.00      | Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                                 |
| Full Name (Last, First, Middle Initial) Folsom, Gleora, , ,  Mailing Address 7816 196TH ST SW APT D7  City EDMONDS  FEC ID number of contributing federal political committee.  Name of Employer Retired Receipt For: 18 Primary General Other (specify)                   | State Zip Code 98026  C  Occupation Retired  Election Cycle-to-Date   500.00 | Date of Receipt  10  |
| SUBTOTAL of Receipts This Page (optional)  | <b>&gt;</b>  | 4500.00  |
| TOTAL This Period (last page this line number  | only)  | 7 7 7  |

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

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

| F  | OR               | LINE | NU | MBER: |  | PAGE |  | 9  | OF  | - | 48 |  |
|----|------------------|------|----|-------|--|------|--|----|-----|---|----|--|
| (c | (check only one) |      |    |       |  |      |  |    |     |   |    |  |
|    | X                | 11a  |    | 11b   |  | 11c  |  | 11 | d   |   |    |  |
|    |                  | 12   |    | 13a   |  | 13b  |  | 14 | . [ |   | 15 |  |

| Any information copied from such Reports and or for commercial purposes, other than using the            |   |  |
|--|---|--|
| NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRE   |   |  |
| Full Name (Last, First, Middle Initial) Forsythe, Gerald, , ,  Mailing Address 11125 Gulf Shore Dr.  512 | Ctoto 72- C. I.                                     | Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Naples  | State Zip Code<br>FL 34108                          | Transaction ID : SA11Al.63091                                |
| FEC ID number of contributing federal political committee.   | С   | Amount of Each Receipt this Period                           |
| Name of Employer Retired  Receipt For: 18  Primary   General  Other (specify) ▼                          | Occupation Retired  Election Cycle-to-Date  1000.00 | Memo Item  |
| Full Name (Last, First, Middle Initial) Forsythe, Gerald, , ,  Mailing Address 11125 Gulf Shore Dr.      |   | Date of Receipt  11 03 2018                                  |
| 512<br>City<br>Naples  | State Zip Code<br>FL 34108                          | Transaction ID : SA11Al.63063                                |
| FEC ID number of contributing federal political committee.  Name of Employer Retired                     | Occupation Retired                                  | Amount of Each Receipt this Period  1000.00  Memo Item       |
| Receipt For: 18  Primary   General  Other (specify) ▼  | Election Cycle-to-Date 2000.00                      | Contribution   |
| Full Name (Last, First, Middle Initial) HARING, ANGELINE, , ,  Mailing Address 825 ALEXANDER RD W  City  | State Zip Code                                      | Date of Receipt  10 31 2018  Transaction ID: SA11Al.63114    |
| BELLVILLE FEC ID number of contributing federal political committee.                                     | OH 44813  | Amount of Each Receipt this Period                           |
| Name of Employer retired  Receipt For: 18  Primary   General Other (specify)   ✓                         | Occupation retired  Election Cycle-to-Date  400.00  | 75.00 Memo Item  |
| SUBTOTAL of Receipts This Page (optional)  | <b>&gt;</b>   | 2075.00  |
| TOTAL This Period (last page this line number  | · only)   | y  |

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

| F  | OR               | LINE | NU | MBER: |  | PAGE | 1 | I U | OF | - | 48 |
|----|------------------|------|----|-------|--|------|---|-----|----|---|----|
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|    | ×                | 11a  |    | 11b   |  | 11c  |   | 11  | d  |   |    |
|    |                  | 12   |    | 13a   |  | 13h  |   | 14  |    |   | 15 |

ITEMIZED RECEIPTS 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) HARRIS, STUART, , , Date of Receipt Mailing Address 2851 SEMINOLE ST 2018 25 City State Zip Code Transaction ID: SA11AI.63099 FL 33133 Coconut Grove FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation SEAVIEW RESEARCH, INC **PHYSICIAN** Memo Item Receipt For: 18 Election Cycle-to-Date Primary 🗶 General 750.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) HILLMAN, Roberta, , , Date of Receipt Mailing Address 504 W BLEEKER ST. 2018 11 02 City State Zip Code Transaction ID: SA11AI.63127 **ASPEN** CO 81611 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date Primary ✗ General 5400.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) HILLMAN, Roberta, , , Date of Receipt Mailing Address 504 W BLEEKER ST. 03 City State Zip Code Transaction ID: SA11AI.63074 **ASPEN** CO 81611 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: Election Cycle-to-Date Contribution Primary ✗ General 8100.00 Other (specify) -5650.00 SUBTOTAL of Receipts This Page (optional).....

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

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

| F  | OR               | LINE | NU | MBER: |  | PAGE |  | П  | OF | - | 48 |  |
|----|------------------|------|----|-------|--|------|--|----|----|---|----|--|
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|    | ×                | 11a  |    | 11b   |  | 11c  |  | 11 | d  |   |    |  |
|    |                  | 12   |    | 13a   |  | 13h  |  | 11 |    |   | 15 |  |

ITEMIZED RECEIPTS 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Hillman, Tatnall, , , Date of Receipt Mailing Address 504 W. Bleeker St. 2018 02 City State Zip Code Transaction ID: SA11AI.63128 CO 81611 Aspen FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2700.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date **X** General Primary 8100.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Hillman, Tatnall, , , Date of Receipt Mailing Address 504 W. Bleeker St. 2018 11 03 City State Zip Code Transaction ID: SA11AI.63075 Aspen CO 81611 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date Contribution Primary ✗ General 10800.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Johnson, Ray, H., , Date of Receipt Mailing Address 4607 Roxbury Rd 25 City State Zip Code Transaction ID: SA11AI.63095 CA Corona Del Mar 92625 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: Election Cycle-to-Date Primary ✗ General Other (specify) -600.00 5500.00 SUBTOTAL of Receipts This Page (optional).....

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

federal political committee.

✗ General

Name of Employer

Primary

Receipt For:

Retired

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

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

| F  | OR               | LINE | NU  | MBER: |    | PAGE | 1 | 2  | OF |  | 48 |
|----|------------------|------|-----|-------|----|------|---|----|----|--|----|
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|    |                  | 12   |     | 13a   |    | 13h  |   | 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Khoury, Amin, , , Date of Receipt Mailing Address 1300 Corporate Center Way 2018 03 City State Zip Code Transaction ID: SA11AI.63073 FL 33414 Wellington FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date Contribution **X** General Primary 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Khoury, Amin, , , Date of Receipt Mailing Address 1300 Corporate Center Way 2018 03 City State Zip Code Transaction ID: SA11AI.63104 Wellington FL 33414 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date Primary ✗ General 2000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) KOLBER, VINCENT, , , Date of Receipt Mailing Address 2245 N MAGNOLIA AVE City State Zip Code Transaction ID: SA11AI.63110 **CHICAGO** ΙL 60614 FEC ID number of contributing C

Occupation

Election Cycle-to-Date

Retired

500.00

Amount of Each Receipt this Period

Memo Item

Name of Employer

plexus consultants Ilc

Primary

Other (specify) ▼

✗ General

Receipt For:

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| F  | OR               | LINE | NU | MBER: |  | PAGE | . 1 | 3  | OF | - | 48 |  |
|----|------------------|------|----|-------|--|------|-----|----|----|---|----|--|
| (c | (check only one) |      |    |       |  |      |     |    |    |   |    |  |
|    | X                | 11a  |    | 11c   |  | 11   | d   |    |    |   |    |  |
|    |                  | 12   |    | 13a   |  | 13b  |     | 14 | ļ  |   | 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Mellott, John, , , Date of Receipt Mailing Address 4338 Redwood Ave Apt B308 2018 31 City State Zip Code Transaction ID: SA11AI.63111 CA 90292 Marina Del Rey FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 490.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date **X** General Primary 735.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MENDEZ, CARLOS, , , Date of Receipt Mailing Address 13450 w sunrise blvd 23 2018 suite 310 10 City State Zip Code Transaction ID: SA11AI.63161 sunrise FL 33323 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee.

Occupation

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

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

director/owner

Election Cycle-to-Date

| C. | Full Name (Last, First, Middle Initial) olemberg, roberto, , , |               |             |       | Date of Receipt                           |
|----|--|---------------|-------------|-------|---|
| Ο. | Mailing Address 580 golden beach drive                         |               |             |       | 10 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
|    | City   | State         | Zip Code    |       | Transaction ID : SA11AI.63167             |
|    | golden beach   | FL            | 33160       |       |   |
|    | FEC ID number of contributing federal political committee.     | С             |             |       | Amount of Each Receipt this Period        |
|    | Name of Employer   | Occupation    |             |       | 500.00                                    |
|    | olem shoe corp   | businessman   |             |       |   |
|    | Receipt For: 18  | Election Cycl | e-to-Date _ |       | Memo Item                                 |
|    | Primary   ✓ General  Other (specify)   ✓                       |               | 50          | 00.00 |   |

500.00

1490.00

500.00

Memo Item

Use separate schedule(s) for each category of the

| F  | OR  | LINE    | NU | MBER: | PAGE | 1 | 4  | OF | 48 |
|----|-----|---------|----|-------|------|---|----|----|----|
| (c | che | ck only | or | ne)   |      |   |    |    |    |
|    | X   | 11a     |    | 11b   | 11c  |   | 11 | d  |    |
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ITEMIZED RECEIPTS **Detailed Summary Page** 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Rosen, Jeffrey, , , Date of Receipt Mailing Address 6000 Island Blvd. 1401 2018 22 City State Zip Code Transaction ID: SA11AI.63088 FL 33160 Aventura FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Occupation Name of Employer **RETIRED RETIRED** Memo Item Receipt For: Election Cycle-to-Date **X** General Primary 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Rosen, Jeffrey, , , Date of Receipt Mailing Address 6000 Island Blvd. 2018 1401 10 22 City State Zip Code Transaction ID: SA11AI.63089 Aventura FL 33160 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1700.00 Name of Employer Occupation **RETIRED** RETIRED Memo Item Receipt For: 18 Election Cycle-to-Date Primary ✗ General 2700.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Rosen, Jeffrey, , , Date of Receipt Mailing Address 6000 Island Blvd. 03 1401 City State Zip Code Transaction ID: SA11AI.63064 FL Aventura 33160 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation **RETIRED RETIRED** Memo Item Receipt For: Election Cycle-to-Date Contribution Primary ✗ General Other (specify) -3700.00

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ITEMIZED RECEIPTS 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Rosen, Jeffrey, , , Date of Receipt Mailing Address 6000 Island Blvd. 1401 2018 03 City State Zip Code Transaction ID: SA11AI.63065 FL 33160 Aventura FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1700.00 Name of Employer Occupation RETIRED **RETIRED** Memo Item Receipt For: Election Cycle-to-Date Contribution **X** General Primary 5400.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Wills, Matthew, , , Date of Receipt Mailing Address 101 Marland Rd S 25 2018 10 City State Zip Code Transaction ID: SA11AI.63103 Colorado Springs CO 80906 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 18 Election Cycle-to-Date Primary ✗ General 500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) Zieve, Peter, , , Date of Receipt Mailing Address 4413 Chennault Beach Rd 03 City State Zip Code Transaction ID: SA11AI.63069 WA Mukilteo 98275 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2630.00 Name of Employer Occupation Electroimpact engineer Memo Item Receipt For: Election Cycle-to-Date Contribution Primary ✗ General Other (specify) -2630.00 4830.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS 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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Zieve, Peter, , , Date of Receipt Mailing Address 4413 Chennault Beach Rd 03 City State Zip Code Transaction ID: SA11AI.63087 WA 98275 Mukilteo FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 2630.00 Name of Employer Occupation Electroimpact engineer Memo Item Receipt For: Election Cycle-to-Date **X** General Primary 5260.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 2630.00 SUBTOTAL of Receipts This Page (optional).....

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19a 19b 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement BJ's Gas 2018 10 26 Mailing Address 620 Riverside Dr City State Zip Code **FEC Identification Number** FΙ **Coral Springs** 33071 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 29.82 Senate Primary General Transaction ID: SB17.63306 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) BJ's Gas Date of Disbursement Mailing Address 620 Riverside Dr 05 2018 City State Zip Code **FEC Identification Number** FL 33071 **Coral Springs** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 27.46 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63276 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial)

Date of Disbursement c. Cinnante, Steven, , , Mailing Address 5187 NE 12th. Ave. 10 18 2018 City State Zip Code **FEC Identification Number** Oakland Park FL 33334 Purpose of Disbursement Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 1340.00 Office Sought: House Disbursement For: Primary General Senate Transaction ID: SB17.63179

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Cinnante, Steven, , , 2018 Mailing Address 5187 NE 12th. Ave. 10 23 City State Zip Code **FEC Identification Number** FΙ Oakland Park 33334 Purpose of Disbursement Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 990.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63196 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Cinnante, Steven, , , Date of Disbursement Mailing Address 5187 NE 12th. Ave. 2018 10 City State Zip Code **FEC Identification Number** FL 33334 Oakland Park Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 405.00 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63201 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. Cinnante, Steven, , , Date of Disbursement Mailing Address 5187 NE 12th. Ave. 05 2018 City State Zip Code **FEC Identification Number** Oakland Park FL 33334 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 660.00 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63277 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2055.00 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement COLORTREE GROUP 2018 10 18 Mailing Address PO BOX 28960 City State Zip Code **FEC Identification Number** VA **HENRICO** 23228 Purpose of Disbursement Program:Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 21519.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63188 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) COLORTREE GROUP Date of Disbursement Mailing Address PO BOX 28960 2018 23 10 City State Zip Code **FEC Identification Number HENRICO** VA 23228 Purpose of Disbursement Program:Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 32544.00 Disbursement For: Office Sought: House -000 Senate Primary General Transaction ID: SB17.63212 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. COLORTREE GROUP Date of Disbursement Mailing Address PO BOX 28960 10 2018 City State Zip Code **FEC Identification Number HENRICO** VA 23228 Purpose of Disbursement Program:Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 18778.00 Office Sought: Disbursement For: House Senate Primary General Transaction ID: SB17.63258 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 72841.00 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement COLORTREE GROUP 2018 10 31 Mailing Address PO BOX 28960 City State Zip Code **FEC Identification Number** VA **HENRICO** 23228 Purpose of Disbursement Program:Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 41794.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63232 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) COLORTREE GROUP Date of Disbursement Mailing Address PO BOX 28960 02 2018 City State Zip Code **FEC Identification Number** VA **HENRICO** 23228 Purpose of Disbursement Program:Printing Candidate Name Amount of Each Disbursement this Period Category/ Type 12179.00 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63240 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. CONSOLIDATED MAILING SERVICES Date of Disbursement Mailing Address 504 SHAW ROAD 10 20 2018 City State Zip Code **FEC Identification Number STERLING** VA 20166 Purpose of Disbursement Program: Mailshop Candidate Name Amount of Each Disbursement this Period Category/ Type 12523.03 Office Sought: Disbursement For: House Senate Primary General Transaction ID: SB17.63187 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 66496.03 TOTAL This Period (last page this line number only).....

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for each category of the 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement CONSOLIDATED MAILING SERVICES 2018 01 Mailing Address 504 SHAW ROAD City State Zip Code **FEC Identification Number** VA **STERLING** 20166 Purpose of Disbursement Program: Mailshop Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 12600.03 Senate Primary General Transaction ID: SB17.63241 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES Date of Disbursement Mailing Address 504 SHAW ROAD 04 2018 City State Zip Code **FEC Identification Number STERLING** VA 20166 Purpose of Disbursement Program: Mailshop Candidate Name Amount of Each Disbursement this Period Category/ Type 10950.61 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63293 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Delivery Signs Date of Disbursement Mailing Address 40 W Crystal Lake St 10 24 2018 City State Zip Code **FEC Identification Number** Orlando FL 32806 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 905.25 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63198 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 24455.89 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement DonorBureau 2018 10 19 Mailing Address 1900 N CULPEPER STREET City State Zip Code **FEC Identification Number** VA ARLINGTON 22207 Purpose of Disbursement Program Candidate Name Amount of Each Disbursement this Period Category/ Type 5648.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63218 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) DonorBureau Date of Disbursement Mailing Address 1900 N CULPEPER STREET 2018 23 10 City State Zip Code **FEC Identification Number** VA **ARLINGTON** 22207 Purpose of Disbursement Program Candidate Name Amount of Each Disbursement this Period Category/ Type 4110.96 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63233 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. DonorBureau Date of Disbursement Mailing Address 1900 N CULPEPER STREET 02 2018 City State Zip Code **FEC Identification Number ARLINGTON** VA 22207 Purpose of Disbursement Program Candidate Name Amount of Each Disbursement this Period Category/ Type 5417.74 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63186 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 15176.70 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Drive Media Branding 2018 Mailing Address 6903 Cypress Rd. 01 Unit C24 State Zip Code City **FEC Identification Number** FΙ Plantation 33317 Purpose of Disbursement Advertisement Candidate Name Amount of Each Disbursement this Period Category/ Type 3750.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63266 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) **Drive Media Branding** Date of Disbursement Mailing Address 6903 Cypress Rd. 80 2018 Unit C24 City State Zip Code **FEC Identification Number** FL 33317 Plantation Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 700.00 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63288 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Dunkin' Donuts Date of Disbursement Mailing Address 2091 Griffin Rd 10 19 2018 City Zip Code State **FEC Identification Number** Fort Lauderdale FL 33312 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 4.75 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63180 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 4454.75 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Dunkin' Donuts 2018 10 22 Mailing Address 2091 Griffin Rd Zip Code City State **FEC Identification Number** FΙ Fort Lauderdale 33312 Purpose of Disbursement Meeting Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2.75 Senate Primary General Transaction ID: SB17.63183 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) **Dunkin' Donuts** Date of Disbursement Mailing Address 2091 Griffin Rd 2018 23 10 City State Zip Code **FEC Identification Number** FL 33312 Fort Lauderdale Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 2.10 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63192 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Dunkin' Donuts Date of Disbursement Mailing Address 2091 Griffin Rd 10 2018 City State Zip Code **FEC Identification Number** Fort Lauderdale FL 33312 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 2.12 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63307 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 6.97 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Dunkin' Donuts 2018 10 29 Mailing Address 2091 Griffin Rd Zip Code City State **FEC Identification Number** FΙ Fort Lauderdale 33312 Purpose of Disbursement Snack Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2.12 Senate Primary General Transaction ID: SB17.63310 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) **Dunkin' Donuts** Date of Disbursement Mailing Address 2091 Griffin Rd 2018 31 10 City State Zip Code **FEC Identification Number** FL 33312 Fort Lauderdale Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 2.96 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63219 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. JOE'S OLD SCHOOL PIZZA Mailing Address 2711 N Hiatus Rd 10 19 2018 City State Zip Code **FEC Identification Number** Hollywood FL 33026 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 36.97 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63236 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 42.05 TOTAL This Period (last page this line number only).....

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement JOE'S OLD SCHOOL PIZZA 2018 06 Mailing Address 2711 N Hiatus Rd City State Zip Code **FEC Identification Number** FΙ Hollywood 33026 Purpose of Disbursement Lunch Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 31.79 Senate Primary General Transaction ID: SB17.63278 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Kaufman, Joe, , , Date of Disbursement Mailing Address 2645 Executive Park Dr 2018 10 City State Zip Code **FEC Identification Number** FL 33331 Weston Purpose of Disbursement Reimburse loan Candidate Name Amount of Each Disbursement this Period Category/ Type 1030.21 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63205 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Kaufman, Joe, , , Date of Disbursement Mailing Address 2645 Executive Park Dr 10 25 2018 512 City State Zip Code **FEC Identification Number** Weston FL 33331 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 791.02 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63206 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1853.02 TOTAL This Period (last page this line number only).....

PAGE 28 48 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 19b 18 19a Detailed Summary Page 20a 20b 20c

21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Kaufman, Joe, , , 2018 Mailing Address 2645 Executive Park Dr 10 25 512 State City Zip Code **FEC Identification Number** FΙ Weston 33331 Purpose of Disbursement Reimburse loan Candidate Name Amount of Each Disbursement this Period Category/ Type 6500.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63209 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Kaufman, Joe, , , Date of Disbursement Mailing Address 2645 Executive Park Dr 2018 31 10 City State Zip Code **FEC Identification Number** FL 33331 Weston Purpose of Disbursement Reimburse loan Candidate Name Amount of Each Disbursement this Period Category/ Type 2500.00 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63264 Other (specify) President

Full Name (Last, First, Middle Initial)

District:

House

#### c. Kaufman, Joe, , ,

State:

Office Sought:

Mailing Address 2645 Executive Park Dr 512 City State Zip Code Weston FL 33331 Purpose of Disbursement Candidate Name Category/ Type

Disbursement For:

| 1 | С                                   |
|---|-------------------------------------|
|   | Amount of Each Disbursement this Pe |
|   | 400.00                              |
|   | Transaction ID : SB17.63231         |

FEC Identification Number

80

2018

Period

Memo Item

Date of Disbursement

| State:            | President District:      | Other (specify) | ▼ | Tr | ansac<br>Mer | tion II<br>no Ite |   | B17 | .632 | :31 |      |      |
|-------------------|--------------------------|-----------------|---|----|--------------|-------------------|---|-----|------|-----|------|------|
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|                        | 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. |                               |   |  |   |  |  |  |  |
|------------------------|--|-------------------------------|---|--|---|--|--|--|--|
| $\left. \right\rangle$ | NAME OF COMMITTEE (In Full)  JOE KAUFMAN FOR CONGRESS  |                               |   |  |   |  |  |  |  |
|                        | Full Name (Last, First, Middle Initial)  |                               |   |  |   |  |  |  |  |
| ۹.                     | Kaufman, Joe, , ,  |                               | Date of Disbursement                    |  |   |  |  |  |  |
|                        | Mailing Address 2645 Executive Park Dr 512   |                               | 11 08 2018                              |  |   |  |  |  |  |
|                        | City   | State                         | Zip Code                                |  | FEC Identification Number                     |  |  |  |  |
|                        | Weston   | FL                            | 33331                                   |  |   |  |  |  |  |
|                        | Purpose of Disbursement<br>Reimburse loan  |                               |   |  | C   |  |  |  |  |
|                        | Candidate Name   |                               |   | Category/<br>Type                      | Amount of Each Disbursement this Period       |  |  |  |  |
|                        | Office Sought: House Disburs   | ement For:                    |   |  | 514.63  |  |  |  |  |
|                        | Senate   | Primary                       | General                                 |  | Transaction ID: SB17.63238                    |  |  |  |  |
|                        | President  | Other (spe                    | cify) ▼                                 |  | Memo Item                                     |  |  |  |  |
|                        | State: District:   Full Name (Last, First, Middle Initial)   |                               |   |  |   |  |  |  |  |
| 3.                     | Kaufman, Joe, , ,  |                               |   |  |   |  |  |  |  |
|                        | Mailing Address 2645 Executive Park Dr 512   |                               |   |  |   |  |  |  |  |
|                        | City   | State                         | Zip Code                                |  | FEC Identification Number                     |  |  |  |  |
|                        | Weston   | FL                            | 33331                                   |  |   |  |  |  |  |
|                        | Purpose of Disbursement<br>Reimburse loan  |                               | C                                       |  |   |  |  |  |  |
|                        | Candidate Name   |                               |   | Category/<br>Type                      | Amount of Each Disbursement this Period       |  |  |  |  |
|                        | Senate President   | ement For: Primary Other (spe | General cify) ▼                         |  | 97.38  Transaction ID : SB17.63239  Memo Item |  |  |  |  |
|                        | State: District:   |                               |   |  |   |  |  |  |  |
|                        | Full Name (Last, First, Middle Initial)  Kaufman, Joe, , ,   |                               |   |  | Date of Disbursement                          |  |  |  |  |
|                        | Mailing Address 2645 Executive Park Dr 512   |                               |   |  | 11 08 2018                                    |  |  |  |  |
|                        | City   | State                         | Zip Code                                |  | FEC Identification Number                     |  |  |  |  |
|                        | Weston   | FL                            | 33331                                   |  |   |  |  |  |  |
|                        | Purpose of Disbursement<br>Reimburse loan  |                               |   |  | C   |  |  |  |  |
|                        | Candidate Name   | Category/<br>Type             | Amount of Each Disbursement this Period |  |   |  |  |  |  |
|                        | Office Sought: House Disbursement For: 5700.00   |                               |   |  |   |  |  |  |  |
|                        | Senate Primary General Transaction ID : SB17.63289   |                               |   |  |   |  |  |  |  |
|                        | President  | Other (spe                    | cify) ▼                                 |  | Memo Item                                     |  |  |  |  |
|                        | State: District:   |                               |   |  |   |  |  |  |  |
| S                      | SUBTOTAL of Disbursements This Page (optional  | ıl)                           |   | ······································ | 6312.01                                       |  |  |  |  |
| Т                      | TOTAL This Period (last page this line number or   | nly)                          |   | ·····•                                 |   |  |  |  |  |

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Kaufman, Joe, , , 2018 08 Mailing Address 2645 Executive Park Dr 512 City State Zip Code **FEC Identification Number** FΙ Weston 33331 Purpose of Disbursement Reimburse loan Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 262.00 Senate Primary General Transaction ID: SB17.63290 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Kaufman, Joe, , , Date of Disbursement Mailing Address 2645 Executive Park Dr 80 2018 City State Zip Code **FEC Identification Number** FL 33331 Weston Purpose of Disbursement Reimburse loan Candidate Name Amount of Each Disbursement this Period Category/ Type 100.00 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63301 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. LCS Miling Date of Disbursement Mailing Address 5055 NE 13th Ave 10 2018 City State Zip Code **FEC Identification Number** Oakland Park FL 33334 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 1060.60 Office Sought: Disbursement For: House Senate Primary General Transaction ID: SB17.63191 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1422.60 TOTAL This Period (last page this line number only).....

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

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ITEMIZED DISBURSEMENTS 19b 20a 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement OFFICE DEPOT 2018 10 22 Mailing Address 651 N University Dr City State Zip Code **FEC Identification Number** FΙ **CORAL SPRINGS** 33071 Purpose of Disbursement Printing Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 89.83 Senate Primary General Transaction ID: SB17.63189 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) OFFICE DEPOT Date of Disbursement Mailing Address 651 N University Dr 05 2018 City State Zip Code **FEC Identification Number** FL **CORAL SPRINGS** 33071 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 19.92 Disbursement For: Office Sought: House -95 Senate Primary General Transaction ID: SB17.63272 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. OFFICE DEPOT Date of Disbursement Mailing Address 651 N University Dr 05 2018 City State Zip Code **FEC Identification Number CORAL SPRINGS** FL 33071 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 17.60 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.63273 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 127.35 TOTAL This Period (last page this line number only).....

PAGE 32 48 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Speedway 2018 10 23 Mailing Address 4695 N University Dr State City Zip Code **FEC Identification Number** FΙ Lauderhill 33351 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 25.58 Senate Primary General Transaction ID: SB17.63303 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **USPS** Date of Disbursement Mailing Address 1900 W Oakland Park Blvd 2018 25 10 Ste 100 City State Zip Code **FEC Identification Number** FL Fort Lauderdale 33310 Purpose of Disbursement postage Candidate Name Amount of Each Disbursement this Period Category/ Type 3344.00 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63203 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. Wawa Date of Disbursement Mailing Address 4401 NW 76th Ave 10 29 2018 City State Zip Code **FEC Identification Number** Lauderhill FL 33351 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 27.55 Office Sought: Disbursement For: House Senate Primary General Transaction ID: SB17.63311 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 3397.13 TOTAL This Period (last page this line number only).....

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

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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) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Wawa 2018 01 Mailing Address 4401 NW 76th Ave City State Zip Code **FEC Identification Number** FΙ Lauderhill 33351 Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 31.46 Senate Primary General Transaction ID: SB17.63220 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Wawa Date of Disbursement Mailing Address 4401 NW 76th Ave 06 2018 City State Zip Code **FEC Identification Number** FL 33351 Lauderhill Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type 29.16 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.63279 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Ynakey, Bob, , , Mailing Address 6660 SW 8 St. 10 2018 City State Zip Code **FEC Identification Number** Pembroke Pines FL 33023 Purpose of Disbursement Expenses Candidate Name Amount of Each Disbursement this Period Category/ Type 400.00 Office Sought: Disbursement For: House General Senate Primary Transaction ID: SB17.63197 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 460.62 TOTAL This Period (last page this line number only)..... 244114.65

#### SCHEDULE C (FEC Form 3) **LOANS**

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

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13b Transaction ID: SC/10.48978 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary JOE KAUFMAN FOR CONGRESS General Mailing Address 2645 EXECUTIVE PARK DRIVE STE 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>24<sup>D</sup> M 04M ž014 Úpon demană x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

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|--|---------------|-------------------|--|
| AME OF COMMITTEE (In Full)<br>IOE KAUFMAN FOR CO | NGRESS        | 3                 | Transaction ID : SC/10.48979   |
| JOE KAUFMAN FOR C                                |               |                   | ☐ Memo Item  |
| Mailing Address<br>2645 EXECUTIVE PARK DRIVE S   | STE 512       |                   | Other (specify) ▼  |
| City   |               | State             | ZIP Code  Personal Funds of the Candidate                                |
| WESTON   |               | FL                | 33331  |
| Original Amount of Loan                          | 000.00        | Cumulative Pa     | Balance Outstanding at Close of This Period 9500.00 1500.00              |
| TERMS Date Incurred                              |               | Γ                 | Date Due Interest Rate Secured: (If none, enter 0)                       |
| M04 <sup>M</sup> / D30 D / Y 20                  | 14 Y          | M M / D D         | Upon demand 0.00 % (apr) Yes No  |
| List All Endorsers or Guaranto                   | ors (if any)  | to Loan Source    |  |
| 1. Full Name (Last, First, Midd                  | le Initial)   |                   | Name of Employer   |
| Mailing Address                                  |               |                   | Occupation   |
| City   | State         | ZIP Code          | Amount Guaranteed Outstanding:   |
| 2. Full Name (Last, First, Middle                | e Initial)    |                   | Name of Employer   |
| Mailing Address                                  |               |                   | Occupation   |
| City   | State         | ZIP Code          | Amount Guaranteed Outstanding:   |
| 3. Full Name (Last, First, Middle                | e Initial)    |                   | Name of Employer   |
| Mailing Address                                  |               |                   | Occupation   |
| City   | State         | ZIP Code          | Amount Guaranteed Outstanding:   |
| 4. Full Name (Last, First, Middle                | e Initial)    |                   | Name of Employer   |
| Mailing Address                                  |               |                   | Occupation   |
|  |               |                   | Amount   |
| City   | State         | ZIP Code          | Guaranteed Outstanding:  |
| SUBTOTALS This Period This Pag                   | je (optional) |                   |  |
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## SCHEDULE C (FEC Form 3) LOANS

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

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Transaction ID: SC/10.5512 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE Other (specify) STE 512 State ZIP Code City X Personal Funds of the Candidate FL 33331 WESTON Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3248.21 0.00 3248.21 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 07M Ž011 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3248.21 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.9126 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE Other (specify) STE 512 State ZIP Code City X Personal Funds of the Candidate FL 33331 WESTON Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 3800.00 1200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 12M Ž011 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1200.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.20680 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> M 06M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.22542 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 07M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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| NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRI   | ESS                   | Transaction ID : SC/10.22543   |
|--|-----------------------|--|
| LOAN SOURCE Full Name (Last, First KAUFMAN, JOE, , , | ☐ Memo Item           |  |
| Mailing Address<br>2645 EXECUTIVE PARK DRIVE # 512   |                       | Other (specify) ▼  |
| City   | State                 | ZIP Code  Personal Funds of the Candidate                                  |
| WESTON   | FL Computative B      | 33331 Polones Outstanding at Class of This Device                          |
| Original Amount of Loan 5000.00                      | Cumulative P          | ayment To Date  Balance Outstanding at Close of This Period  0.00  5000.00 |
| TERMS Date Incurred                                  | ,                     | Date Due Interest Rate Secured:  |
| M07M / D13D / Y Ž01Ž Y                               | M M / D               | (If none, enter 0)  Upon Demand  0.00  (apr)  Yes  No                      |
| List All Endorsers or Guarantors (if a               | ny) to Loan Source    | 9  |
| 1. Full Name (Last, First, Middle Initia             | l)                    | Name of Employer   |
| Mailing Address                                      |                       | Occupation   |
| City   | ite ZIP Code          | Amount Guaranteed Outstanding:   |
| 2. Full Name (Last, First, Middle Initial)           |                       | Name of Employer   |
| Mailing Address                                      |                       | Occupation   |
| O'th.  | 4- 7ID O-4-           | Amount<br>Guaranteed   |
| City   | te ZIP Code           | Outstanding:   |
| 3. Full Name (Last, First, Middle Initial)           |                       | Name of Employer   |
| Mailing Address                                      |                       | Occupation   |
| City   | ate ZIP Code          | Amount Guaranteed Outstanding:   |
| 4. Full Name (Last, First, Middle Initial)           |                       | Name of Employer   |
| Mailing Address                                      |                       | Occupation   |
|  |                       | Amount<br>Guaranteed   |
| City   | te ZIP Code           | Outstanding:   |
| SUBTOTALS This Period This Page (option              | onal)                 | 5000.00  |
| TOTALS This Period (last page in this line           | e only)               |  |
| Carry outstanding balance only to LINE 3             | 3, Schedule D. for th | nis line. If no Schedule D, carry forward to appropriate line of Summary.  |

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

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**x** 13a 13b

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Transaction ID: SC/10.22544 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>16<sup>D</sup> M 07M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.26611 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3200.00 823.50 2376.50 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D <sup>M</sup>80<sup>M</sup> Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2376.50 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.50920 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> <sup>M</sup>80<sup>M</sup> ž014 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.50921 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> <sup>M</sup>80<sup>M</sup> ž014 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.58526 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Kaufman, Joseph, , , General Mailing Address 8708 NW 82 ST. Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33321 Tamarac Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5745.93 0.00 5745.93 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 03M Ž015 Yon demand Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5745.93 TOTALS This Period (last page in this line only)..... 39570.64 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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| NAME OF COMMITTEE (In Full)   |   |                               |  |  |
|---|---|-------------------------------|--|--|
| JOE KAUFMAN   | N FOR CON   | IGRESS                        |  |  |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT, INC. |   |                               | Nature of Debt (Purpose): Direct Mail Creative Fees      |  |
| Mailing Address 1155 15th St<br>STE 410   | NW  |                               |  |  |
| City<br>Washington  | State<br>DC   | Zip Code<br>20005             |  |  |
| Outstanding Balance Beginning   | ng This Period  |                               | Transaction ID : SD10.33907                              |  |
|   | 20235.44  |                               |  |  |
| Amount Incurred This  | Period  | Payment This Period           | Outstanding Balance at Close of This Period              |  |
|   | 0.00  | 0.00                          | 20235.44   |  |
| B. Full Name (Last, First, Middle CENTURY DATA S)                                   | •   | litor                         | Nature of Debt (Purpose): Direct Mail Program Postage    |  |
| Mailing Address 1155 - 15TH S   | STREET, NW  |                               |  |  |
| City<br>WASHINGTON  | State<br>DC   | Zip Code<br>20005             |  |  |
| Outstanding Balance Beginning   | ng This Period  |                               | Transaction ID : SD10.33908                              |  |
|   | 6552.89   |                               |  |  |
| Amount Incurred This  | Period  | Payment This Period           | Outstanding Balance at Close of This Period              |  |
|   | 0.00  | 0.00                          | 6552.89  |  |
|   | C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT MAIL PROCESSORS, INC. |                               | Nature of Debt (Purpose):<br>Direct Mail Program Postage |  |
| Mailing Address 2976 Penwick  | c Lane  |                               |  |  |
| City  | State   | Zip Code                      |  |  |
| Dunkirk   | MD  | 20754                         |  |  |
| Outstanding Balance Beginning   | Outstanding Balance Beginning This Period   |                               | Transaction ID: SD10.33909                               |  |
| 7   | 102.55  |                               |  |  |
| Amount Incurred This  | Period  | Payment This Period           | Outstanding Balance at Close of This Period              |  |
|   | 0.00  | 0.00                          | 102.55   |  |
| 1) SUBTOTALS This Period This   | Page (optional) ······  |                               | 26890.88   |  |
| 2) TOTALS This Period (last page  | e this line number only)  |                               | ·  |  |
| 3) TOTAL OUTSTANDING LOAN   | S from Schedule C (last p   | page only)                    | >  |  |
| 4) ADD 2) and 3) and carry forward  | ard to appropriate line of  | Summary Page (last page only) | <b>&gt;</b>  |  |

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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|    |   |   |                               | ,   1,1,1   |  |
|----|---|---|-------------------------------|---|--|
|    | ME OF COMMITTEE (In Full)   | $\sim$  | ICDECC                        |   |  |
| J  | OE KAUFMAN FOR  A. Full Name (Last, First, Middle Initial) of De INTEGRAM | Nature of Debt (Purpose): Direct Mail Program Printing & Mailshop |                               |   |  |
|    | Mailing Address 22695 Commerce Center Co                                  |   |                               |   |  |
| ŀ  | City  | State   | Zip Code                      | _   |  |
|    | Dulles  | VA  | 20166                         |   |  |
|    | Outstanding Balance Beginning This Period                                 |   | Transaction ID : SD10.33910   |   |  |
|    | 10210.45  |   |                               | Outstanding Balance at Close of This Period           |  |
|    | Amount Incurred This Period   |   | Payment This Period           |   |  |
|    | 0.00  |   | 0.00                          | 10210.45  |  |
| ŀ  | B. Full Name (Last, First, Middle Initial) of Deb                         | otor or Cred  | litor                         | Nature of Debt (Purpose):                             |  |
|    | LEGACY LISTS, INC BROK  | ERAGE   |                               | Direct Mail List Rental                               |  |
|    | Mailing Address 1155 - 15TH STREET, NW<br>SUITE 410                       |   |                               |   |  |
| Ī  | City  | State   | Zip Code                      |   |  |
| ŀ  | WASHINGTON  | DC  | 20005                         |   |  |
|    | Outstanding Balance Beginning This Period                                 |   |                               | Transaction ID: SD10.33911                            |  |
|    | 6327.81   |   |                               |   |  |
|    | Amount Incurred This Period Payment This Period                           |   | Payment This Period           | Outstanding Balance at Close of This Period           |  |
|    | 0.00  |   | 0.00                          | 6327.81   |  |
| -  | C. Full Name (Last, First, Middle Initial) of De                          | btor or Cre   | ditor                         | Notice of Dobt (Dumono)                               |  |
|    | LEGACY LISTS, INC MANA  |   |                               | Nature of Debt (Purpose): Direct Mail List Management |  |
| ŀ  | Mailing Address 1155 15th St NW   |   |                               | _   |  |
|    | 1155 15th St NW   |   |                               |   |  |
| Ī  | City  | State   | Zip Code                      |   |  |
|    | Washington  | FL  | 20005                         |   |  |
|    | Outstanding Balance Beginning This Period                                 |   |                               | Transaction ID : SD10.33912                           |  |
|    | 6769.75   |   |                               |   |  |
|    | Amount Incurred This Period   |   | Payment This Period           | Outstanding Balance at Close of This Period           |  |
|    | 0.00  |   | 0.00                          | 6769.75   |  |
| 1) | SUBTOTALS This Period This Page (optional)                                | )   |                               | <b>▶</b> 23308.01                                     |  |
| 2) | TOTALS This Period (last page this line number                            | ber only) ····  |                               | ·   |  |
| 3) | TOTAL OUTSTANDING LOANS from Schedule C (last page only)                  |   |                               | ·   |  |
| 4) | ADD 2) and 3) and carry forward to appropri                               | ate line of   | Summary Page (last page only) | <b>&gt;</b>   |  |

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

#### NAME OF COMMITTEE (In Full)

| (Use separate  | PAGE 4           | 8 OF | 48 |
|----------------|------------------|------|----|
| schedule(s)    | FOR LINE NUMBER  | ₹:   |    |
| for each       | (check only one) |      | 9  |
| numbered line) |                  | X    | 10 |

| JOE KAUFMAN FOR   | CONG   | GRESS               |   |
|---|--|---------------------|---|
| A. Full Name (Last, First, Middle Initial) of De SIMPKINS ESCROW LLC                        | Nature of Debt (Purpose):<br>Indirect Prog Exp Caging & Escrow |                     |   |
| Mailing Address 29243 St Just Dr  | Mailing Address 29243 St Just Dr                               |                     |   |
| City<br>UNIONVILLE  | State<br>VA  | Zip Code<br>22567   |   |
| Outstanding Balance Beginning This Period   |  |                     | Transaction ID : SD10.33913                 |
| 93.00   |  |                     |   |
| Amount Incurred This Period   | ı  | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00  |  | 0.00                | 93.00                                       |
| B. Full Name (Last, First, Middle Initial) of Del   | otor or Creditor   |                     | Nature of Debt (Purpose):                   |
| Mailing Address   |  |                     | _   |
| G C   |  | _                   |   |
| 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 |
| SUBTOTALS This Period This Page (optional)  |  |                     | 93.00                                       |
| TOTALS This Period (last page this line number only)  |  |                     | 50291.89                                    |
| TOTAL OUTSTANDING LOANS from Schedule C (last page only)                                    |  |                     | 39570.64                                    |
| ADD 2) and 3) and carry forward to appropr  | 89862.53   |                     |   |