FEC FORM 3	AND DI	OF RE SBURSE	MENTS	Office	Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRIN		cample: If typing, type ver the lines.	12FE4M5	
ADDRESS (number ar		RD MCGEE JR			
•	2850 N ANDR	ES AVE			
Check if dit than previo reported. (A	usly FT LAUDERD	DALE		FL 33311	
2. FEC IDENTIFIC	CATION NUMBER V	CITY		STATE	
C C0055338	38	3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
(a) Quarterly R April 15 July 15 Octobe	PORT (Choose One) eports: 5 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election on	General (30G)	General (12G) Special (12S) / Y Y Y Y : Runoff (30R)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period		y y y y y 2015	through 03	M / D D / Y 31	Y Y Y 2015
I certify that I have e Type or Print Name	examined this Report and to	o the best of my ki IGH Leigh MCGEE	nowledge and belief it is	true, correct and con	plete.
Signature of Treasure	er ANDREA LEIGH Leigh	MCGEE	[Electronically Filed]	Date	16 / Y Y Y Y 16 2015
NOTE: Submission of Office Use Only	false, erroneous, or incompl	ete information may	subject the person signing	F	nalties of 2 U.S.C. §437g. EC FORM 3 Revised 02/2003)

PAGE 1 / 17

SUMMARY PAGE of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name MCGEE FOR CONGRESS D D 01 03 31 2015 01 2015 Report Covering the Period: From: To: COLUMN A COLUMN B **Election Cycle-to-Date** This Period 6. Net Contributions (other than loans) **Total Contributions** (a) 0.00 16987.83 (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) 0.00 16987.83 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 45.00 14522.83 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 45.00 14522.83 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of -781.23 Reporting Period (from Line 27)..... 9. 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 7268.77 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

Г	- DE	TAILED SUMMARY PAGE	
	FEC Form 3 (Revised 12/2003)	of Receipts	PAGE 3 / 17
W	rite or Type Committee Name		
Ν	ICGEE FOR CONGRESS		
Re	eport Covering the Period: From:	/ D D / Y Y Y Y 01 / 2015 To:	M M / D D / Y Y Y Y Y 03 / 31 2015
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	0.00	11272.83
	(ii) Unitemized	0.00	5415.00
	(iii) TOTAL of contributions from individuals	0.00	16687.83
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	300.00
	(e) TOTAL CONTRIBUTIONS (other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	16987.83
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	8287.19
	(b) All Other Loans	0.00	196.31
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	8483.50
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS	0.00	0.00
	(Dividends, Interest, etc.)	7 7 7 8	0.00
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	25471.33

FE5AN018

Image# 15970365867

of Disbursements PAGE 4 / 17 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 45.00 14522.83 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 1018.42 by the Candidate..... 0.00 196.31 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 1214.73 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 10440.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 45.00 26177.56 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY**

DETAILED SUMMARY PAGE

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	-736.23
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	0.00
25. SUBTOTAL (add Line 23 and Line 24)	-736.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	45.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-781.23

Image# 15970365868

age# 15970365869						PAGE 5 OF	17
HEDULE C (FEC For ANS		Use separate scl for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one)	3a 3b		
ME OF COMMITTEE (In Full)	S	Tr	ansaction I	ID : SC/10.4371			
LOAN SOURCE Full Name (La Andrea McGee	st, First, Mi	ddle Initial)			Elec	ction: 2014 Primary	
Mailing Address 961 NE 27th Ave						General Other (specify) v	
City		State	ZIP Code	Э			
Pompano Beach		FL	33062				
Original Amount of Loan		Cumulative	Payment To D		Balance (Outstanding at Close of This P	erio
	6.36		7	0.00	<u> </u>	6.36	_
TERMS Date Incurred			Date Due	Interes	t Rate	Secured:	
^M 07 ^M / ^D 01 ^D / ^Y Ž0	14 ^Y	M M / D	D / Y11/	5/2014 ^Y	0.00	% (apr)] No
List All Endorsers or Guaranto		to Loan Sour					
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:	7	· · · · · · · · ·	
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			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · · · · · · · · · · · · · ·	
JBTOTALS This Period This Pag	this line onl	y)		· · · · · ·		6.36	

ige# 15970365870						
HEDULE C (FEC Fo ANS		Use separate sch for each categor Detailed Summar	y of the	PAGE 6 OF 17 FOR LINE NUMBER: (check only one) X 13a 13b		
ME OF COMMITTEE (In Full)	SS			Tra	ansaction I	ID : SC/10.4387
LOAN SOURCE Full Name (L Andrea McGee	ast, First, Mi	ddle Initial)			Elec	ction: 2014 Primary
Mailing Address 961 NE 27th Ave						General Other (specify) v
City		State	ZIP Code)		
Pompano Beach		FL	33062			
Original Amount of Loan		Cumulative P	Payment To D		Balance (Dutstanding at Close of This Perio
<u> </u>	60.42			0.00	L	60.42
TERMS Date Incurred	Y Y	M M / D	Date Due	Interes		Secured:
^M 07 ^M / ^D 01 ^D / ^Y 2	014 [×]		11/	5/2014	0.00	(apr) Yes No
List All Endorsers or Guaran	tors (if any) t	o Loan Sourc	е			100 110
1. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	
2. Full Name (Last, First, Mido	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	· · · · · · ·
3. Full Name (Last, First, Mido	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 7	
4. Full Name (Last, First, Mido	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	
JBTOTALS This Period This Pa	this line only	y)		· · · · · · · · · · · · · · · · · · ·		60.42

age# 15970365871			
HEDULE C (FEC Form ANS	3)	Use separate scheo for each category o Detailed Summary I	of the (check only one) X 13
ME OF COMMITTEE (In Full)		Trans	saction ID : SC/10.4388
LOAN SOURCE Full Name (Last, F Andrea McGee	First, Middle Initial)		Election: 2014 Primary General
Mailing Address 961 NE 27th Ave			Other (specify)
City	State	ZIP Code	
Pompano Beach	FL	33062	
Original Amount of Loan	Cumulative Pa	ayment To Date E	Balance Outstanding at Close of This Pe
65	.56	0.00	65.56
TERMS Date Incurred		Date Due Interest R	Rate Secured:
M07 ^M / D02 ^D / Y Ž01Å	Y M M / D .	⁷ ¹ 1/5/2Ŏ14 ¹ 0	0.00 % (apr)
List All Endorsers or Guarantors (
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · ·
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
JBTOTALS This Period This Page (o	ptional)	····· [65.56
OTALS This Period (last page in this			orward to appropriate line of Summa

ge# 15970365872				-		
CHEDULE C (FEC Form 3) DANS				Use separate sche for each category Detailed Summary	of the	PAGE 8 OF FOR LINE NUMBER: 13 (check only one) X 13
ME OF COMMITTEE (In	,			Tra	nsaction I	D : SC/10.4385
LOAN SOURCE Full N Andrea McGee	lame (Last, First, Mic	ddle Initial)			Elec	ction: 2015 Primary
Mailing Address 961 NE 27th Ave						General Other (specify) ▼
City		State	ZIP Code	9		
Pompano Beach		FL	33062			
Original Amount of Loa		Cumulative Pa	ayment To D		Balance (Dutstanding at Close of This Pe
	68.10	9		0.00	L	68.10
TERMS Date Inc	urred Y Ž01Ă Y		Date Due	5/2014 Y	0.00	Secured:
List All Endorsers or 0	Quarantors (if any) t					Yes Yes
1. Full Name (Last, Fir				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		y 1 1 1 1
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
JBTOTALS This Period ⁻						68.10 7 7

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13 Transaction ID : SC/10.4390 Election: 2014 Primary General Other (specify) • 0.00 3898.95 Interest Rate Secured: 2014 2014 0.00 % (apr) Yes Yes
Election: 2014 Primary General Other (specify) ▼ te Balance Outstanding at Close of This Perest Rate Secured: 2014 0.00 9% (apr) Yes ame of Employer ccupation
te Balance Outstanding at Close of This Pe 0.00 3898.95 Interest Rate Secured: 2014 ^Y 0.00 % (apr) Yes ame of Employer ccupation
te Balance Outstanding at Close of This Pe 0.00 3898.95 Interest Rate Secured: 2014 ^Y 0.00 % (apr) Yes ame of Employer ccupation
0.00 3898.95 Interest Rate Secured: 2014 0.00 % (apr) Yes ame of Employer ccupation mount
0.00 3898.95 Interest Rate Secured: 2014 0.00 % (apr) Yes ame of Employer ccupation mount
0.00 3898.95 Interest Rate Secured: 2014 0.00 % (apr) Yes ame of Employer ccupation mount
Interest Rate Secured: 2014 0.00 % (apr) Yes ame of Employer ccupation mount
2014 0.00 % (apr) Yes
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3898.95

age# 15970365874						
CHEDULE C (FEC Form 3) DANS				Use separate schedu for each category of Detailed Summary P	the	PAGE 10 OF 1 FOR LINE NUMBER: (check only one)
ME OF COMMITTEE (In Full)	SS			Transa	action ID	: SC/10.4386
LOAN SOURCE Full Name (Andrea McGee	Last, First, Mic	ddle Initial)				ion: 2014 Primary General
Mailing Address 961 NE 27th Ave						Other (specify)
City		State	ZIP Code	9		
Pompano Beach		FL	33062			
Original Amount of Loan	12.71	Cumulative I	Payment To D	Date Ba	alance Ou	utstanding at Close of This Per 12.71
<u> </u>	12.71				_	9 9 4
TERMS Date Incurred M07 ^M P27 ^D Y Y	2014 ^Y	M M / D	Date Due	Interest Ra 5/2014 [×] 0.0		Secured:
List All Endorsers or Guarar	tors (if any) t	o Loan Sourc	ce			Yes M
1. Full Name (Last, First, Mic	Idle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · ·
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9	
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 7	
4. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · ·
UBTOTALS This Period This Pa				·		7 7 7 7
Carry outstanding balance only	to LINE 3, Scł	nedule D, for t	this line. If no	o Schedule D, carry fo	rward to	appropriate line of Summar

age# 15970365875							
CHEDULE C (FEC Form 3) DANS				Use separate sche for each category Detailed Summary	of the	PAGE 11 FOR LINE NUMBER: (check only one)	OF 17
ME OF COMMITTEE (In Full)	SS			Tran	saction I	ID : SC/10.4389	
LOAN SOURCE Full Name (L Andrea McGee	.ast, First, Mid	dle Initial)			Elec	ction: 2014 Primary	
Mailing Address 961 NE 27th Ave						General Other (specify) ▼	
City		State	ZIP Code	9			
Pompano Beach		FL	33062				
Original Amount of Loan		Cumulative P	ayment To D	Date	Balance (Outstanding at Close of	This Perio
	45.03			0.00		9 9	45.03
TERMS Date Incurred M08 / D06 / Y 2	2014 Y		Date Due	5/2014	Rate 0.00	Secure	X
List All Endorsers or Guaran	tors (if any) to	b Loan Source	Э			Ye	es No
1. Full Name (Last, First, Mid	Idle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		· · · · · ·	_
2. Full Name (Last, First, Midd	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 9	· · · · · · ·	
3. Full Name (Last, First, Mido	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · ·	
4. Full Name (Last, First, Mido	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		9 1 1	
UBTOTALS This Period This Pa						<u>y</u>	45.03
arry outstanding balance only		-			forward	to appropriate line of s	Summary

age# 15970365876						
HEDULE C (FEC F ANS		Use separate sch for each categor Detailed Summar	/ of the	PAGE 12 OF 17 FOR LINE NUMBER: (check only one) X 13a 13b		
ME OF COMMITTEE (In Full) CGEE FOR CONGR			Tra	ansaction I	D : SC/10.4431	
LOAN SOURCE Full Name Andrea McGee	(Last, First, Mic	ddle Initial)			Elec	ction: 2014 Primary General
Mailing Address 961 NE 27th Ave.						Other (specify)
City		State	ZIP Code)		
Pompano Beach		FL	33062			
Original Amount of Loan		Cumulative P	ayment To D		Balance (Dutstanding at Close of This Perio
	56.17			0.00		56.17
TERMS Date Incurred			Date Due	Interes		Secured:
^M 08 ^M / ^D 15 ^D / Y	ž014 ^v	M M / D	D / Y 12	2/1/15 ^Y	0.00	% (apr) □Yes ⊠_N
List All Endorsers or Guara	antors (if any) t	o Loan Sourc	e			105 10
1. Full Name (Last, First, N	liddle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	· · · · · · · · ·
2. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	
3. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	
4. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	
JBTOTALS This Period This DTALS This Period (last page	in this line only	/)		· · · · · · · · · · · · · · · · · · ·		56.17 7 7

age# 15970365877						
HEDULE C (FEC F ANS		Use separate sc for each catego Detailed Summa	ry of the	PAGE 13 OF FOR LINE NUMBER: (check only one)		
ME OF COMMITTEE (In Full CGEE FOR CONGR				Ті	ransaction I	D : SC/10.4433
LOAN SOURCE Full Name Andrea McGee	e (Last, First, Mic	ddle Initial)			Elec	otion: 2014 Primary General
Mailing Address 961 NE 27th Ave.						Other (specify) v
City		State	ZIP Code)		
Pompano Beach		FL	33062			
Original Amount of Loan		Cumulative P	ayment To D	ate	Balance (Dutstanding at Close of This Pe
	1398.14			0.00		1398.14
TERMS Date Incurred			Date Due		st Rate	Secured:
M08 ^M / D15 ^D / Y	2014 ^Y	M M / D		2/1/16	0.00	% (apr)
List All Endorsers or Guar		o Loan Sourc				
1. Full Name (Last, First, N	Aiddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · ·
3. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
JBTOTALS This Period This	e in this line only	/)		·····		1398.14

age# 15970365878					
CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) \times 13a
ME OF COMMITTEE (In Full)	6			Transa	ction ID : SC/10.4432
LOAN SOURCE Full Name (Last Andrea McGee	t, First, Mic	ddle Initial)			Election: 2014 Primary General
Mailing Address 961 NE 27th Ave.					Other (specify)
City		State	ZIP Code	9	
Pompano Beach		FL	33062		
Original Amount of Loan	18.00	Cumulative F	Payment To D	ate Bala	ance Outstanding at Close of This Period 318.00
TERMS Date Incurred		M M / D		Interest Rat 2/1/16 Y 0.00	
List All Endorsers or Guarantor		o Loan Sourc		Name of Employer	
1. Full Name (Last, First, Middle	initial)			vame of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1 y 1
4. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·
UBTOTALS This Period This Page OTALS This Period (last page in th	nis line only	y)		······	318.00

age# 15970365879		
HEDULE C (FEC Form 3) DANS)	Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4434
LOAN SOURCE Full Name (Last, Fin Andrea McGee	st, Middle Initial)	Election: 2014 Primary General
Mailing Address 961 NE 27th Ave.		Other (specify) ▼
City	State ZIP C	ode
Pompano Beach	FL 33062	2
Original Amount of Loan 159.00	Cumulative Payment T	o Date Balance Outstanding at Close of This Period 0.00 159.00
TERMS Date Incurred M09 ^M / P27 ^D / Y 2014 Y		e Interest Rate Secured: 12/1/16 0.00 % (apr) Yes N
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Initi		Name of Employer
	al)	
Mailing Address		Occupation
City St	tate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City Si	tate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City Si	tate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City St	tate ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (opt	ne only)	

age# 15970365880		·	
CHEDULE C (FEC Form 3) DANS		for each actor and of the	PAGE 16 OF 17 INE NUMBER: c only one) X 13a 13b
ME OF COMMITTEE (In Full)		Transaction ID : SC/1	0.4435
LOAN SOURCE Full Name (Last, Firs	st, Middle Initial)	Election: Primary Genera	1
Mailing Address 961 NE 27th Ave.			specify) 🔻
City	State ZIP Co	ode	
Pompano Beach	FL 33062		
Original Amount of Loan 979.44	Cumulative Payment To	Date Balance Outstand	ling at Close of This Period 979.44
TERMS Date Incurred M 09 / 27 / 2014 List All Endersors or Currenters (if a		Interest Rate 12/1/15 ¥ 0.00 % (a	Secured: apr) Yes No
List All Endorsers or Guarantors (if a 1. Full Name (Last, First, Middle Initia		Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	yK
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y 1 1 1 1
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y
UBTOTALS This Period This Page (opti OTALS This Period (last page in this lin	e only)	······	979.44

nage# 15970365881			
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)
AME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transaction	n ID : SC/10.4206
LOAN SOURCE Full Name (Last, First, N ANDREA LEIGH Leigh MCGEE	,	[lection: 2014 Primary General
Mailing Address 961 NE 27TH AVENUE			Other (specify)
City	State ZIP C	ode	
POMPANO BEACH	FL 33062	2	
Original Amount of Loan	Cumulative Payment T	o Date Balance	e Outstanding at Close of This Period
200.89		0.00	200.89
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
M04 ^M / D15 ^D / Y 2014 ^Y		11/4/14 ^Y 0.00	₩ (apr) Yes No
List All Endorsers or Guarantors (if any)	to Loan Source		103 100
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
Oit. Otata		Amount Guaranteed	
City State	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · ·
SUBTOTALS This Period This Page (optiona FOTALS This Period (last page in this line of Carry outstanding balance only to LINE 3. S	nly)		200.89