

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Scott for Congress

ADDRESS (number and street) Post Office Box 251
 Check if different than previously reported. (ACC) Newport News VA 23607

2. **FEC IDENTIFICATION NUMBER** ▼ C00256925 CITY ▲ Newport News STATE ▲ VA ZIP CODE ▲ STATE ▼ DISTRICT VA 03

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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

Type or Print Name of Treasurer Edna B Scott

Signature of Treasurer Edna B Scott *[Electronically Filed]* Date M M / D D / Y Y Y Y 01 / 31 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Scott for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	32512.48	112940.82
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	32512.48	112940.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	18655.02	128300.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1232.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	18655.02	127068.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	55463.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	3191.43	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Scott for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	450.00	22200.00
(ii) Unitemized	1562.48	10324.18
(iii) TOTAL of contributions from individuals	2012.48	32524.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	30500.00	80416.64
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	32512.48	112940.82
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1232.14
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	32512.48	114172.96

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18655.02	128300.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	2500.00	7500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	21155.02	135800.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	44106.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	32512.48
25. SUBTOTAL (add Line 23 and Line 24).....	76618.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21155.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	55463.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Scott for Congress

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

Mailing Address 415 E Cape Shores Dr

City Lewes State DE Zip Code 19958-3109

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

Name of Employer National Wildlife Refuge Ass'n Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2013

Transaction ID : C10078175

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Carolyn Yancey

Mailing Address 8819 Woodland Dr

City Silver Spring State MD Zip Code 20910-2708

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

Name of Employer Food and Drug Administration Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013

Transaction ID : C10069370

Amount of Each Receipt this Period
200.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

450.00

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Altria Group Inc. Political Action Committee

Mailing Address 120 Park Avenue

City State Zip Code
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 03 / 2013

Transaction ID : C10076042

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
American Federation Of State County & Municipal Em

Mailing Address 1625 L Street Nw

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 16 / 2013

Transaction ID : C10148434

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Comcast Corporation Political Action Committee

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 22 / 2013

Transaction ID : C10070292

Amount of Each Receipt this Period
 1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Dominion Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 26666
 One James River Plaza 20th Floor
 City Richmond State VA Zip Code 23261-6666
 FEC ID number of contributing federal political committee. **C C00108209**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2013
Transaction ID : C10148433
 Amount of Each Receipt this Period
 2500.00

B. Drive - Democrat Republican Independent Voter Educ
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Louisiana Ave NW
 City Washington State DC Zip Code 20001-2130
 FEC ID number of contributing federal political committee. **C C00032979**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013
Transaction ID : C10076039
 Amount of Each Receipt this Period
 2500.00

C. GRIDIRON-PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 PARK AVENUE
 City NEW YORK State NY Zip Code 10154
 FEC ID number of contributing federal political committee. **C C00451153**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : C10168140
 Amount of Each Receipt this Period
 1500.00

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
HEALTH DIAGNOSTIC LABORATORY INC PAC

Mailing Address 737 N 5TH STREET SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00526491

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : C10073107

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPAC)

Mailing Address 300 M St SE Ste 350

City Washington State DC Zip Code 20003-3436

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : C10168137

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : C10168141

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Mcguirewoods Llp

Mailing Address **One James Center**
901 E. Cary Street

City **Richmond** State **VA** Zip Code **23219**

FEC ID number of contributing federal political committee. **C C00225342**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
11 / 21 / 2013

Transaction ID : C10069348

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
National Cable And Telecommunications Association

Mailing Address **1724 Massachusetts Ave NW**

City **Washington** State **DC** Zip Code **20036-1918**

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
11 / 21 / 2013

Transaction ID : C10069321

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND

Mailing Address **10 G STREET, NE, SUITE #600**
SUITE 600

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00172296**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
11 / 21 / 2013

Transaction ID : C10069367

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Nuclear Energy Institute Federal Political Action

Full Name (Last, First, Middle Initial)
Mailing Address 1201 F ST NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : C10168348

Amount of Each Receipt this Period
1000.00

B. OHIO GROCERS ASSOCIATION OHIO FOOD PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3280 RIVERSIDE DRIVE
SUITE 10

City COLUMBUS State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C C00227397**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2013

Transaction ID : C10069357

Amount of Each Receipt this Period
1000.00

C. PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL FEDERAL PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2013

Transaction ID : C10069338

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
SQUIRE SANDERS AND DEMPSEY LLP POLITICAL ACTION CO

Mailing Address 1201 PENNSYLVANIA AVENUE NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00444935

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2013

Transaction ID : C10076043

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
The National Education Association Fund for Childr

Mailing Address 1201 16th St NW Ste 420

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : C10168132

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
The National Education Association Fund for Childr

Mailing Address 1201 16th St NW Ste 420

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : C10168136

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

Mailing Address 1300 I ST NW
STE 400 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : C10168131

Amount of Each Receipt this Period
 1500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

30500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 93.00 Transaction ID : D697519
City Newport News	State VA	
Zip Code 23605	Purpose of Disbursement Storage fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 96.00 Transaction ID : D697532
City Newport News	State VA	
Zip Code 23605	Purpose of Disbursement Storage fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 96.00 Transaction ID : D705321
City Newport News	State VA	
Zip Code 23605	Purpose of Disbursement Storage fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Allied Waste Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 124 Greene Dr		Amount of Each Disbursement this Period 116.14 Transaction ID : D697523
City Yorktown	State VA Zip Code 23692-4800	
Purpose of Disbursement Trash Container Rental	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 183124		Amount of Each Disbursement this Period 83.75 Transaction ID : D697520
City Columbus	State OH Zip Code 43218-3124	
Purpose of Disbursement Cable	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 183124		Amount of Each Disbursement this Period 83.75 Transaction ID : D705323
City Columbus	State OH Zip Code 43218-3124	
Purpose of Disbursement Cable	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	283.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 183124		Amount of Each Disbursement this Period 83.75
City Columbus	State OH	Zip Code 43218-3124
Purpose of Disbursement Cable	Category/Type 001	
Candidate Name	Transaction ID : D697533	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Erickson and Company		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 38 Ivy St SE		Amount of Each Disbursement this Period 640.56
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Facility Rental & food	Category/Type 003	
Candidate Name	Transaction ID : D697530	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 169.75
City Fort Lauderdale	State FL	Zip Code 33340-7066
Purpose of Disbursement Service fee	Category/Type 001	
Candidate Name	Transaction ID : D697874	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	894.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. First Data		M M / D D / Y Y Y Y 10 / 03 / 2013	
Mailing Address PO Box 407066		Amount of Each Disbursement this Period	
City State Zip Code Fort Lauderdale FL 33340-7066		23.81	
Purpose of Disbursement Service fee		Transaction ID : D696226	
Candidate Name		001 Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. First Data		M M / D D / Y Y Y Y 10 / 03 / 2013	
Mailing Address PO Box 407066		Amount of Each Disbursement this Period	
City State Zip Code Fort Lauderdale FL 33340-7066		1.17	
Purpose of Disbursement Service/ Discount fee		Transaction ID : D696227	
Candidate Name		001 Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. First Data		M M / D D / Y Y Y Y 10 / 03 / 2013	
Mailing Address PO Box 407066		Amount of Each Disbursement this Period	
City State Zip Code Fort Lauderdale FL 33340-7066		0.03	
Purpose of Disbursement Service / Intercharge fee		Transaction ID : D696228	
Candidate Name		001 Category/ Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	25.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		03		2013
M M	/	D D	/	Y Y Y Y									
12		03		2013									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fort Lauderdale</td> <td>FL</td> <td>33340-7066</td> </tr> </table>		City	State	Zip Code	Fort Lauderdale	FL	33340-7066	<table border="1"> <tr> <td>0.10</td> </tr> </table>		0.10			
City	State	Zip Code											
Fort Lauderdale	FL	33340-7066											
0.10													
Purpose of Disbursement Service /Intercharge fee		Transaction ID : D705368											
Candidate Name		Category/Type											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		03		2013
M M	/	D D	/	Y Y Y Y									
12		03		2013									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fort Lauderdale</td> <td>FL</td> <td>33340-7066</td> </tr> </table>		City	State	Zip Code	Fort Lauderdale	FL	33340-7066	<table border="1"> <tr> <td>11.66</td> </tr> </table>		11.66			
City	State	Zip Code											
Fort Lauderdale	FL	33340-7066											
11.66													
Purpose of Disbursement Service/Discount		Transaction ID : D705369											
Candidate Name		Category/Type											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		03		2013
M M	/	D D	/	Y Y Y Y									
12		03		2013									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Fort Lauderdale</td> <td>FL</td> <td>33340-7066</td> </tr> </table>		City	State	Zip Code	Fort Lauderdale	FL	33340-7066	<table border="1"> <tr> <td>13.30</td> </tr> </table>		13.30			
City	State	Zip Code											
Fort Lauderdale	FL	33340-7066											
13.30													
Purpose of Disbursement Service fee		Transaction ID : D705370											
Candidate Name		Category/Type											
Office Sought:		Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional)	25.06
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Greater Southeast Development Corp		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 2101 Jefferson Avenue		Amount of Each Disbursement this Period 100.00 Transaction ID : D697538
City Newport News	State VA	
Zip Code 23607-4517	Purpose of Disbursement Donation for Thanksgiving Feeding	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hampton NAACP		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 1108 Mary Peake Blvd		Amount of Each Disbursement this Period 425.00 Transaction ID : D697516
City Hampton	State VA	
Zip Code 23666-4550	Purpose of Disbursement Ad & Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mission of Mercy		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 3460 Mayland Ct Ste 110		Amount of Each Disbursement this Period 250.00 Transaction ID : D705315
City Henrico	State VA	
Zip Code 23233-1454	Purpose of Disbursement Phillipine relief	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D697524
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software Licensing & Web Package Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Omega Foundation, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 9228		Amount of Each Disbursement this Period 200.00 Transaction ID : D705365
City Hampton State VA Zip Code 23670-0228	Purpose of Disbursement Holiday donation for at risk kids Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Portsmouth NAACP		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 3878		Amount of Each Disbursement this Period 150.00 Transaction ID : D697526
City Portsmouth State VA Zip Code 23701-0878	Purpose of Disbursement Ad Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Thalhimer as agent for Maritime Square LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 5160 Attn: Commercial Accounting-7554		Amount of Each Disbursement this Period 506.37 Transaction ID : D697518
City Glen Allen	State VA	
Zip Code 23058-5160	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Thalhimer as agent for Maritime Square LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 5160 Attn: Commercial Accounting-7554		Amount of Each Disbursement this Period 477.71 Transaction ID : D705317
City Glen Allen	State VA	
Zip Code 23058-5160	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Thalhimer as agent for Maritime Square LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address PO Box 5160 Attn: Commercial Accounting-7554		Amount of Each Disbursement this Period 55.47 Transaction ID : D697537
City Glen Allen	State VA	
Zip Code 23058-5160	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1039.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Thalhimer as agent for Maritime Square LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 5160 Attn: Commercial Accounting-7554		Amount of Each Disbursement this Period 477.71 Transaction ID : D697529
City Glen Allen	State VA	
Zip Code 23058-5160	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 239.84 Transaction ID : D697522
City Worcester	State MA	
Zip Code 01615-0023	Purpose of Disbursement Cell phone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 219.95 Transaction ID : D697528
City Worcester	State MA	
Zip Code 01615-0023	Purpose of Disbursement Cell phone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	937.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 233.46 Transaction ID : D705212
City Worcester	State MA Zip Code 01615-0023	
Purpose of Disbursement Cell phone	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 321.72 Transaction ID : D697521
City Baltimore	State MD Zip Code 21297-0429	
Purpose of Disbursement Office phone	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 319.92 Transaction ID : D697531
City Baltimore	State MD Zip Code 21297-0429	
Purpose of Disbursement Office phone	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	875.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 331.98
City Baltimore	State MD	
Zip Code 21297-0429	Purpose of Disbursement Office phone	Transaction ID : D705318
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Virginia Center for Inclusive Communities		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 5511 Staples Mill Rd Ste 202		Amount of Each Disbursement this Period 175.00
City Henrico	State VA	
Zip Code 23228-5445	Purpose of Disbursement Tickets	Transaction ID : D697535
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013
Mailing Address 337 47th St		Amount of Each Disbursement this Period 2203.80
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Salary	Transaction ID : D697534
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2710.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 337 47th St		Amount of Each Disbursement this Period 2203.80 Transaction ID : D697527
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 337 47th St		Amount of Each Disbursement this Period 2203.80 Transaction ID : D693828
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 337 47th St		Amount of Each Disbursement this Period 1000.00 Transaction ID : D705367
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Cell phone, Mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5407.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Capital One		M M / D D / Y Y Y Y 10 / 03 / 2013	
Mailing Address PO Box 85617		Amount of Each Disbursement this Period	
City Richmond State VA Zip Code 23285-5617		412.74	
Purpose of Disbursement Credit Card Payment		Transaction ID : D693816	
Candidate Name		Category/Type 001	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Capital One		M M / D D / Y Y Y Y 12 / 02 / 2013	
Mailing Address PO Box 85617		Amount of Each Disbursement this Period	
City Richmond State VA Zip Code 23285-5617		1003.53	
Purpose of Disbursement Credit card payment		Transaction ID : D697510	
Candidate Name		Category/Type 001	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
c. Capital One		M M / D D / Y Y Y Y 11 / 27 / 2013	
Mailing Address PO Box 85617		Amount of Each Disbursement this Period	
City Richmond State VA Zip Code 23285-5617		289.26	
Purpose of Disbursement Interest		Transaction ID : D697511	
Candidate Name		Category/Type 001	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1416.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. U. S. Airways			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013	
Mailing Address 4000 E. Sky Harbor Blvd.			Amount of Each Disbursement this Period 384.20	
City Phoenix	State AZ	Zip Code 85034	Transaction ID : D697514	
Purpose of Disbursement Airline ticket		Category/ Type 002	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Capital One			Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013	
Mailing Address PO Box 85617			Amount of Each Disbursement this Period 411.00	
City Richmond	State VA	Zip Code 23285-5617	Transaction ID : D702958	
Purpose of Disbursement Credit card payment		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Amtrak			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013	
Mailing Address 9304 Warwick Blvd			Amount of Each Disbursement this Period 411.00	
City Newport News	State VA	Zip Code 23601-4535	Transaction ID : D702959	
Purpose of Disbursement Train ticket		Category/ Type 002	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	411.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address PO Box 85617

City Richmond State VA Zip Code 23285-5617

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 19 / 2013

Amount of Each Disbursement this Period: 151.39

Transaction ID : D706236

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Factory Card Outlet

Mailing Address 12134 Jefferson Ave

City Newport News State VA Zip Code 23602-6908

Purpose of Disbursement Supplies for reception

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 06 / 2013

Amount of Each Disbursement this Period: 49.25

Transaction ID : D706237

[MEMO ITEM]

Category/Type: 001

Full Name (Last, First, Middle Initial)

c. Capital One

Mailing Address PO Box 85617

City Richmond State VA Zip Code 23285-5617

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2013

Amount of Each Disbursement this Period: 393.08

Transaction ID : D706241

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 544.47

TOTAL This Period (last page this line number only) 17930.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 2500.00 Transaction ID : D705366
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues <input type="checkbox"/> 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Democratic Party of Virginia		Nature of Debt (Purpose): GOTV calls
Mailing Address 1710 E Franklin St		
City	State	Zip Code
Richmond	VA	23223-7025

Outstanding Balance Beginning This Period	Transaction ID : D489671	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Numark Gallery		Nature of Debt (Purpose): Rental
Mailing Address 625 E St NW		
City	State	Zip Code
Washington	DC	20004-2204

Outstanding Balance Beginning This Period	Transaction ID : D765	
<input type="text" value="500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Promotional Considerations		Nature of Debt (Purpose): Yard Signs
Mailing Address 6500 Dickens Pl		
City	State	Zip Code
Richmond	VA	23230-2002

Outstanding Balance Beginning This Period	Transaction ID : D209571	
<input type="text" value="191.43"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="191.43"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3191.43"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="3191.43"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3191.43"/>