

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

McHenry for Congress

ADDRESS (number and street)

PO Box 1406

Check if different than previously reported. (ACC)

Hickory

NC

28603-1406

2. FEC IDENTIFICATION NUMBER ▼

C C00393629

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NC

10

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

MM / DD / YYYY
11 / 04 / 2014

MM / DD / YYYY

MM / DD / YYYY

in the State of

NC

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2014

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY
10 / 15 / 2014

MM / DD / YYYY

MM / DD / YYYY

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 Lisker Lisa

Signature of Treasurer Lisker Lisa

[Electronically Filed]

Date

MM / DD / YYYY
10 / 23 / 2014

MM / DD / YYYY

MM / DD / YYYY

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
McHenry 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))....	58310	1513434.79
(b) Total Contribution Refunds (from Line 20(d))	0	4800
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58310	1508634.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45930.61	785984.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	16309.03
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45930.61	769675.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	944991.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

McHenry 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).....	23140	555377.76
(ii) Unitemized.....	3660	26775.95
(iii) TOTAL of contributions from individuals ▶	26800	582153.71
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	31510	931281.08
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	58310	1513434.79
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	25394.56
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	16309.03
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	71.91
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	58310	1555210.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45930.61	785984.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	2300
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	4800
21. OTHER DISBURSEMENTS	2000	54026.21
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	47930.61	844810.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	934611.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58310
25. SUBTOTAL (add Line 23 and Line 24).....	992921.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47930.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	944991.08

**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 35
	<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)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. George D. Renfro

Mailing Address 15 Greenwood Road

City State Zip Code
Biltmore Forest NC 28803-3110

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

Name of Employer Occupation
Investor Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : A-CF19273

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. A. Alex Shuford

Mailing Address 1627 Cauble Dairy Road

City State Zip Code
Hickory NC 28602-7149

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

Name of Employer Occupation
C V Industries Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : A-CF19271

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Al Crouse & Associates

Mailing Address PO Box 11019

City State Zip Code
Hickory NC 28603-4519

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19351

Amount of Each Receipt this Period
250

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Grady Crouse

Mailing Address **PO Box 11019**

City **Hickory** State **NC** Zip Code **28603-4519**

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

Name of Employer **Self Employed** Occupation **Insurance**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : A-PIP18

Amount of Each Receipt this Period
250

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Mr. David M. Berry

Mailing Address **3828 Old Shelby Road**

City **Hickory** State **NC** Zip Code **28602-9087**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **365**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19330

Amount of Each Receipt this Period
50

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

Mailing Address **1470 9th Avenue Drive NE**

City **Hickory** State **NC** Zip Code **28601-4199**

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

Name of Employer **Bowen Primary & Urgent Care** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19312

Amount of Each Receipt this Period
1000

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Representa Dana Bumgardner

Mailing Address 3517 Lincoln Lane

City State Zip Code
Gastonia NC 28056-8877

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

Name of Employer Occupation
NC General Assembly State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19287

Amount of Each Receipt this Period
250

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

Mailing Address 11 Circle Drive

City State Zip Code
Belmont NC 28012-3108

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

Name of Employer Occupation
Pharr Yarns Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19292

Amount of Each Receipt this Period
100

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

Mailing Address 1717 Rhode Island Avenue NW
Suite 1000

City State Zip Code
Washington DC 20036-3027

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

Name of Employer Occupation
Revolution LLC Chairman/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19301

Amount of Each Receipt this Period
2600

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

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

2950.00

**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 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Cox

Mailing Address 2205 Windsor Road

City State Zip Code
Alexandria VA 22307-1019

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

Name of Employer Occupation
Navigators Global Founding Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19302

Amount of Each Receipt this Period
500

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

Mailing Address 8879 Hagers Ferry Road

City State Zip Code
Denver NC 28037-8569

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

Name of Employer Occupation
Duke Power Systems Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19319

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Donald Grant

Mailing Address 1714 Wildwood Road

City State Zip Code
Gastonia NC 28052-5001

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

Name of Employer Occupation
Grant Exterminating Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19281

Amount of Each Receipt this Period
100

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Councilman Walter Kimble

Mailing Address 2769 Independence Way

City State Zip Code
Gastonia NC 28056-6709

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19290

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Mr. Harold Lackey

Mailing Address 1365 Winged Foot Lane

City State Zip Code
Denver NC 28037-6514

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
540

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19324

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Harold Lackey

Mailing Address 1365 Winged Foot Lane

City State Zip Code
Denver NC 28037-6514

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
540

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19325

Amount of Each Receipt this Period
40

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

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

640.00

**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 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Landon Lane

Mailing Address 1006 4th Avenue Drive NW

City State Zip Code
Hickory NC 28601-3453

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

Name of Employer Occupation
Self Employed Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19331

Amount of Each Receipt this Period
500

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

Mailing Address 2635 Puetts Chapel Road

City State Zip Code
Bessemer City NC 28016-8700

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

Name of Employer Occupation
Self Employed None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19278

Amount of Each Receipt this Period
250

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

Mailing Address 402 Glen Arbor St

City State Zip Code
Belmont NC 28012-3759

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

Name of Employer Occupation
CVS/pharmacy Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19280

Amount of Each Receipt this Period
250

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

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

1000.00

**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 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Sonny Roseman

Mailing Address **PO Box 2128**

City **Hickory** State **NC** Zip Code **28603-2128**

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

Name of Employer **CR Laine Furniture** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19329

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mrs. Mildred Shuford

Mailing Address **2425 N Center Street # 322**

City **Hickory** State **NC** Zip Code **28601-1320**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19335

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. John Walsh

Mailing Address **PO Box 4023**

City **Mooreville** State **NC** Zip Code **28117-4023**

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

Name of Employer **SightSpan** Occupation **President/CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19308

Amount of Each Receipt this Period
500

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

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

1750.00

**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 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Brian F. Ward

Mailing Address 4 Derby Lane

City State Zip Code
Medfield MA 02052-1330

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

Name of Employer Occupation
Fidelity Investments SVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19304

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Craig Watson

Mailing Address 504 S York Street

City State Zip Code
Gastonia NC 28052-4038

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

Name of Employer Occupation
Watson Insurance Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19404

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mrs. Raye Watson-Smyth

Mailing Address 1621 Forest Ridge Drive

City State Zip Code
Stanley NC 28164-7791

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19318

Amount of Each Receipt this Period
250

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

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

950.00

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

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

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Louis S. Wetmore

Mailing Address **PO Box 2262**

City **Hickory** State **NC** Zip Code **28603-2262**

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

Name of Employer **Omnistar Financial** Occupation **Weath Advisor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19334

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr. J. Douglas Wilkins

Mailing Address **1060 12th Avenue Lane NW**

City **Hickory** State **NC** Zip Code **28601-2301**

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

Name of Employer **Evergreen Development** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19344

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Commission Jason Williams

Mailing Address **1051 Sapphire Drive**

City **Gastonia** State **NC** Zip Code **28054-0012**

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

Name of Employer **Ewing Insurance Agency** Occupation **Insurance Agent**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19277

Amount of Each Receipt this Period
250

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

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

550.00

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

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

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Dr. H Grey Winfield III

Mailing Address 965 18th Avenue Circle NW

City State Zip Code
Hickory NC 28601-1200

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19341

Amount of Each Receipt this Period
100

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

Mailing Address 19010 Mary Ardrey Circle

City State Zip Code
Cornelius NC 28031-7500

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

Name of Employer Occupation
Homemaker Retired CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19310

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Mr. Don Beaver

Mailing Address 3763 Golf Drive NE

City State Zip Code
Conover NC 28613-9455

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

Name of Employer Occupation
Beaver Sports Inc. Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19373

Amount of Each Receipt this Period
500

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 15 OF 35
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Larry Bowman

Mailing Address 1043 Rolling Green Dr

City State Zip Code
Newton NC 28658-9229

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

Name of Employer Occupation
Bowman Investments Private Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19376

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Joe C. Brumit

Mailing Address 234 Skycliff Drive

City State Zip Code
Asheville NC 28804-8101

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

Name of Employer Occupation
Brumit Restaurant Group Franchisee

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19360

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Marc Casper

Mailing Address 288 Warren Street

City State Zip Code
Brookline MA 02445-5927

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

Name of Employer Occupation
Thermo Fisher Scientific CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19358

Amount of Each Receipt this Period
500

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Jeffery Cernuto

Mailing Address 158 W Maranta Road

City Mooresville State NC Zip Code 28117-6337

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

Name of Employer Princeton Management Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19119

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Rich Davies

Mailing Address 5605 Carnegie Boulevard

City Charlotte State NC Zip Code 28209-4642

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

Name of Employer Pavilion Development Co. Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19381

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Lewis Efird

Mailing Address 2931 Grampian Drive

City Gastonia State NC Zip Code 28054-6462

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

Name of Employer United Oil of the Carolinas Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19362

Amount of Each Receipt this Period
500

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Leila Erwin

Mailing Address 742 Bost Road

City Morganton State NC Zip Code 28655-8026

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

Name of Employer More Lace Gifts Occupation Retail Store Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19359

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mrs. Carman Johnson

Mailing Address 435 US Highway 70 SE

City Hickory State NC Zip Code 28602-5123

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19375

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mayor Robert Keith

Mailing Address 153 Allen Drive

City Lake Lure State NC Zip Code 28746-9266

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

Name of Employer Lake Lure Occupation Mayor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19366

Amount of Each Receipt this Period
50

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ellis Monroe

Mailing Address **PO Box 2168**

City **Shelby** State **NC** Zip Code **28151-2168**

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

Name of Employer **Self Employed** Occupation **Mfg Representative**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19364

Amount of Each Receipt this Period
50

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

Mailing Address **4396 1st Street Drive NW**

City **Hickory** State **NC** Zip Code **28601-8185**

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

Name of Employer **Neill Grading & Const. Co. Inc** Occupation **Construction**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19372

Amount of Each Receipt this Period
500

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

Mailing Address **310 4th Street SW**

City **Hickory** State **NC** Zip Code **28602-2819**

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

Name of Employer **Elite Properties, Inc.** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : A-CF19374

Amount of Each Receipt this Period
250

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Susanne Sellers

Mailing Address 8149 Deep Water Lane

City State Zip Code
Denver NC 28037-8892

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850

Date of Receipt

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

Transaction ID : A-CF19378

Amount of Each Receipt this Period
850

B. Full Name (Last, First, Middle Initial)
Mr. Dana L. Stonestreet

Mailing Address 1643 Olmsted Drive

City State Zip Code
Asheville NC 28803-1937

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

Name of Employer Occupation
HomeTrust Banking President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt

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

Transaction ID : A-CF19379

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Robert Sulaski

Mailing Address PO Box 65

City State Zip Code
Montreat NC 28757-0065

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

Name of Employer Occupation
Sulaski & Tinsley Fine Homes Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4800

Date of Receipt

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

Transaction ID : A-CF19357

Amount of Each Receipt this Period
1000

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Diane Teeter

Mailing Address 6762 Big Sky Lane

City State Zip Code
Hickory NC 28602-8505

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19431

Amount of Each Receipt this Period
300

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

Mailing Address 6762 Big Sky Lane

City State Zip Code
Hickory NC 28602-8505

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

Name of Employer Occupation
Pepsi Bottling Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19355

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Ronald Young

Mailing Address 166 Attleboro Place

City State Zip Code
 Mooresville NC 28117-7106

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

Name of Employer Occupation
Wireway Husky Corporation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2700

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : A-CF19354

Amount of Each Receipt this Period
500

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

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

1000.00

23140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 35
	<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)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Verizon Wireless PAC

Mailing Address 1300 I Street NW
Suite 400 W

City Washington State DC Zip Code 20005-3314

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
8000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : A-CF19270

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Zeneca Inc. Political Action Committee

Mailing Address PO Box 15438

City Wilmington State DE Zip Code 19850-5437

FEC ID number of contributing federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : A-CF19272

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
ACE Cash Express, Inc. PAC

Mailing Address 1231 Greenway Drive #600

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00392290

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19276

Amount of Each Receipt this Period
5000

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
	<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)
McHenry for Congress

A. Action Commt. For Rural Electrification

Full Name (Last, First, Middle Initial)
Mailing Address 4301 Wilson Boulevard

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19297

Amount of Each Receipt this Period
 1000

B. American Hotel & Lodging Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1201 New York Avenue NW
Floor 6

City Washington State DC Zip Code 20005-3917

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19328

Amount of Each Receipt this Period
 2500

C. Bank of America Corp. Federal PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1455 Pennsylvania Avenue NW
Suite 950

City Washington State DC Zip Code 20004-1043

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 8000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19327

Amount of Each Receipt this Period
 1000

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 23 OF 35
	<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)
McHenry for Congress

A. Carolinas Healthcare System PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 32861

City State Zip Code
Charlotte NC 28232-2861

FEC ID number of contributing federal political committee. **C** C00423871

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19299

Amount of Each Receipt this Period
5000

B. Eli Lilly and Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address Lilly Corporate Center

City State Zip Code
Indianapolis IN 46285-0001

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19296

Amount of Each Receipt this Period
1000

C. Independent Community Bankers Of America

Full Name (Last, First, Middle Initial)
Mailing Address 1615 L Street NW
Suite 900

City State Zip Code
Washington DC 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19275

Amount of Each Receipt this Period
1000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 35
	<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)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Murphy Oil Corporation PAC

Mailing Address PO Box 602

City State Zip Code
El Dorado AR 71731-0602

FEC ID number of contributing federal political committee. **C C00145722**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19303

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
National Cotton Council Committee For Th

Mailing Address PO Box 820292

City State Zip Code
Memphis TN 38182-0292

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19300

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
National Pork Producers Council Pork Pac

Mailing Address PO Box 10383
P O Box 10383

City State Zip Code
Des Moines IA 50306-0383

FEC ID number of contributing federal political committee. **C C00201871**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF19295

Amount of Each Receipt this Period
2500

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 35
	<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)
McHenry for Congress

A. New Frontier Pac

Full Name (Last, First, Middle Initial)
New Frontier Pac

Mailing Address 135 Briarwood Place

City Wake Forest State NC Zip Code 27587-4679

FEC ID number of contributing federal political committee. **C** C00529685

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19326

Amount of Each Receipt this Period
 10

B. Thermo Fisher Scientific Inc., PAC Account

Full Name (Last, First, Middle Initial)
Thermo Fisher Scientific Inc., PAC Account

Mailing Address 81 Wyman Street

City Waltham State MA Zip Code 02451-1223

FEC ID number of contributing federal political committee. **C** C00393629

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19274

Amount of Each Receipt this Period
 2000

C. Timken Company Good Government Fund, The

Full Name (Last, First, Middle Initial)
Timken Company Good Government Fund, The

Mailing Address 1835 Dueber Avenue SW

City Canton State OH Zip Code 44706-2728

FEC ID number of contributing federal political committee. **C** C00311308

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19298

Amount of Each Receipt this Period
 1000

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

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

3010.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 35
	<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)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
UnitedHealth Group PAC

Mailing Address 701 Pennsylvania Avenue NW
Suite 650

City Washington State DC Zip Code 20004-3610

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF19294

Amount of Each Receipt this Period
2500

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).....

2500.00

31510.00

**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 27 OF 35	
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. EFTPS(Internal Revenue Service)		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 105703		Amount of Each Disbursement this Period 2060.41 Transaction ID : B-E-19392
City Atlanta State GA Zip Code 30348-5703	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Harper Polling LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 121 State Street		Amount of Each Disbursement this Period 2653 Transaction ID : B-E-19395
City Harrisburg State PA Zip Code 17101-1005	Purpose of Disbursement Research/Polling Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joe Bost		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 201 Government Avenue SW Suite 302		Amount of Each Disbursement this Period 67 Transaction ID : B-E-19396
City Hickory State NC Zip Code 28602-2954	Purpose of Disbursement Reimbursement-Food/Beverage-No Vendors Require Itemization Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4780.41
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 28 OF 35			
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. Joe Bost		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 201 Government Avenue SW Suite 302		Amount of Each Disbursement this Period 2999.62
City Hickory	State NC	
Zip Code 28602-2954	Purpose of Disbursement Salary	Transaction ID : B-E-19397
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Erica Church		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 3752 Westwood Road		Amount of Each Disbursement this Period 2578.8
City Hamptonville	State NC	
Zip Code 27020-7398	Purpose of Disbursement Salary	Transaction ID : B-E-19393
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Prism Property Management (Armory Building)		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address PO Box 729		Amount of Each Disbursement this Period 850
City Hickory	State NC	
Zip Code 28603-0729	Purpose of Disbursement Rent	Transaction ID : B-E-19389
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6428.42
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 29 OF 35			
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. Joe Bost		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 201 Government Avenue SW Suite 302		Amount of Each Disbursement this Period 81.26 Transaction ID : B-E-19398
City Hickory	State NC	
Zip Code 28602-2954	Purpose of Disbursement Reimbursement-Mileage	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Erica Church		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 3752 Westwood Road		Amount of Each Disbursement this Period 250 Transaction ID : B-E-19394
City Hamptonville	State NC	
Zip Code 27020-7398	Purpose of Disbursement Insurance/Cell Phone Stipend	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Megan K Foran		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 449 E 14th Street Apt. 11C		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-19399
City New York	State NY	
Zip Code 10009-2736	Purpose of Disbursement Fundraising Consulting	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2331.26
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 30 OF 35	
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial)

A. Business Card

Mailing Address PO Box 15469

City Wilmington State DE Zip Code 19886-5469

Purpose of Disbursement Credit Card Payment-See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 2343.28

Transaction ID : B-E-19390

Original vendors exceeding reporting threshold itemized as memo transactions.

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-4285

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 383

Transaction ID : B-S-16850

[MEMO ITEM]
Subitemization of Business Card(10/08/14)

Category/Type:

Full Name (Last, First, Middle Initial)

C. Business Card

Mailing Address PO Box 15469

City Wilmington State DE Zip Code 19886-5469

Purpose of Disbursement Interest

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 48.72

Transaction ID : B-S-16851

[MEMO ITEM]
Subitemization of Business Card(10/08/14)

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 2343.28

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 31 OF 35			
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. Cantina Marina		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 600 Water Street SW		Amount of Each Disbursement this Period 379.9
City Washington	State DC	
Zip Code 20024-2471	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-16852
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Business Card(10/08/14)
State: District:		

Full Name (Last, First, Middle Initial) B. District Taco		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1309 F Street NW		Amount of Each Disbursement this Period 73.8
City Washington	State DC	
Zip Code 20004-1183	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-16853
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Business Card(10/08/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 3010 N Center Street		Amount of Each Disbursement this Period 55.32
City Hickory	State NC	
Zip Code 28601-1161	Purpose of Disbursement Food/Beverage	Transaction ID : B-S-16855
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Business Card(10/08/14)
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 35			
	<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)
McHenry for Congress

A. Hobby Lobby

Full Name (Last, First, Middle Initial)
Mailing Address 1495 E Franklin Boulevard

City Gastonia State NC Zip Code 28054-4059

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 286.49

Transaction ID : B-S-16856

[MEMO ITEM]
Subitemization of Business Card(10/08/14)

B. Nooshi

Full Name (Last, First, Middle Initial)
Mailing Address 1120 19th Street NW

City Washington State DC Zip Code 20036-3605

Purpose of Disbursement Food/Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 16.9

Transaction ID : B-S-16859

[MEMO ITEM]
Subitemization of Business Card(10/08/14)

c. US Airways, Inc

Full Name (Last, First, Middle Initial)
Mailing Address 111 W Rio Salado Parkway

City Tempe State AZ Zip Code 85281-2880

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2014

Amount of Each Disbursement this Period: 520.2

Transaction ID : B-S-16866

[MEMO ITEM]
Subitemization of Business Card(10/08/14)

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 35			
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. Century Link		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 96064		Amount of Each Disbursement this Period 291.86 Transaction ID : B-E-19391
City Charlotte	State NC	
Zip Code 28296-0064	Purpose of Disbursement Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Oorbeek Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 5903 Woodfield Estates Drive		Amount of Each Disbursement this Period 28984.23 Transaction ID : B-E-19402
City Alexandria	State VA	
Zip Code 22310-1870	Purpose of Disbursement Fundraising Consulting/Catering	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 450 Laurel Street Suite 2105		Amount of Each Disbursement this Period 8.1 Transaction ID : B-E-19388
City Baton Rouge	State LA	
Zip Code 70801-1821	Purpose of Disbursement CC Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	29284.19
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 34 OF 35	
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 3180 18th Street		Amount of Each Disbursement this Period 763.05
City San Francisco	State CA Zip Code 94110-2043	
Purpose of Disbursement CC Processing Fees	Category/ Type 001	Transaction ID : B-E-19400
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

Full Name (Last, First, Middle Initial) 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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	763.05
TOTAL This Period (last page this line number only).....	45930.61

**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 35 OF 35	
	<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)
McHenry for Congress

Full Name (Last, First, Middle Initial) A. The Levinson Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1235E East Boulevard # 257		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-19401
City Charlotte	State NC	
Zip Code 28203-5707	Purpose of Disbursement Non Federal Contribution	Category/ Type 011
Candidate Name The Levinson Committee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Tim Griffin for Arkansas		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 7546		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-19403
City Little Rock	State AR	
Zip Code 72217-7546	Purpose of Disbursement Non Federal Contribution	Category/ Type 011
Candidate Name Tim Griffin for Arkansas		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) 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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00