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Image# 13964009904

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An		zed Comr	nittee			Office	e Use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRI	NT ▼		mple: If typing r the lines.	g, type	12FE4M	5	
DRUMMOND	FOR C	ONGRESS							ı
ADDRESS (number ar	nd street)	1031-B NUR	SERY RD						
Check if di	ferent								
than previo reported. (A		CHIPLEY					FL	32428	
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY A			STATE A		ZIP CODE A STATE ▼ DISTRICT
C C005076	24			S THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	FL 02
4. TYPE OF RE		Choose One)	(b) 1	2-Day PRE -	Election Repo	rt for the:			
(a) Quarterly R	eports:			П	Primary (12P)	Г	General (12G)	Runoff (12R)
April 15	Quarterl	y Report (Q1)		Ē		-		,	
X July 15	Quarterly	/ Report (Q2)			Convention (120)	Special (1	125)	
Octobe	r 15 Quai	rterly Report (Q3)	ı	Election on	M M /	D D /	Y " Y " Y		in the State of
January	/ 31 Year-	-End Report (YE)	(c) 3	0-Day POS 1	-Election Rep	ort for the:			
					General (30G)	Runoff (3	0R)	Special (30S)
Termina	ation Repo	ort (TER)		Election on	M M /	D D /	Y " Y " Y		in the State of
5. Covering Period	N	1 04 / 01 D		013 Y	through	M M M 06	/ 0 0 /	Y	y
I certify that I have e	examined	this Report and	to the be	st of my kno	owledge and l	belief it is tr	ue, correct an	d com	nplete.
Type or Print Name	of Treasu	rer WILLIAM C	LEAVE DF	RUMMOND II					
Signature of Treasure	er <u>W</u>	VILLIAM CLEAVE D	RUMMON	D II	Electronically I	Filed] [oate 07	/	09 / Y Y Y Y Y Y 2013
NOTE: Submission of	false, err	oneous, or incomp	olete inforr	mation may s	ubject the per	son signing t	his Report to t	the per	nalties of 2 U.S.C. §437g.
Office									EC FORM 3
Use Only									Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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TEO TOTTI O (Nevised 02/2000

Write or Type Committee Name

DRUMMOND FOR CONGRESS

R	eport Covering the Period: From:	01 / Y Y Y Y Y Y Y TO	. M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		<u> </u>
	(a) Total Contributions (other than loans) (from Line 11(e))	163.64	624.63
	(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))	163.64	624.63
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	215.36	627.08
	(b) Total Offsets to Operating Expenditures (from Line 14)	17.95	17.95
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	197.41	609.13
8.	Cash on Hand at Close of Reporting Period (from Line 27)	39.89	
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)	376.85	

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 PAGE 3 / 11 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DRUMMOND FOR CONGRESS

04 01 2013 06 30 2013 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1. CON	TRIBUTIONS (other than loans) FROM:				
`	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00		
	(ii) Unitemized	0.00	300.00		
((iii) TOTAL of contributions from individuals	0.00	300.00		
	Political Party Committees Other Political Committees	0.00	0.00		
` '	(such as PACs)	0.00	0.00		
(e)	The Candidate TOTAL CONTRIBUTIONS	163.64	324.63		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	163.64	624.63		
	NSFERS FROM OTHER HORIZED COMMITTEES	0.00	0.00		
3. LOAN					
	Made or Guaranteed by the Candidate	0.00	0.00		
` '	All Other Loans	0.00	0.00		
, ,	(add Lines 13(a) and (b))	0.00	0.00		
	SETS TO OPERATING ENDITURES				
	inds, Rebates, etc.)	17.95	17.95		
	ER RECEIPTS dends, Interest, etc.)	0.00	0.00		
11(e)	AL RECEIPTS (add Lines , 12, 13(c), 14, and 15) y Total to Line 24, page 4)	181.59	642.58		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	215.36	627.08	
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 (c) Other Political Committees	0.00	0.00	
	(such as PACs)	0.00	0.00	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00	
21.	OTHER DISBURSEMENTS	0.00	0.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	215.36	627.08	
	III. CASH SU	JMMARY		
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	73.66	
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)				
25.	SUBTOTAL (add Line 23 and Line 24)		255.25	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	215.36	
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		39.89	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

		FOR LINE NUMBER:			PAGE	=	5 OF	=	11	
Use separate schedule(s)	(c	(check only one)								
for each category of the		11a		11b		11c	X	11d		
Detailed Summary Page		12		13a		13b		14		15
not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports and Statements may 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) DRUMMOND FOR CONGRESS Full Name (Last, First, Middle Initial) WILLIAM CLEAVE DRUMMOND II Date of Receipt Mailing Address 1031-B NURSERY RD 2013 80 City State Zip Code Transaction ID: SA11D.4255 FL 32425 **CHIPLEY** FEC ID number of contributing Amount of Each Receipt this Period H2FL01209 federal political committee. 40.00 Name of Employer Occupation Personal Deposit Self Emplaoy Freelance Artist, Website Designer Receipt For: 2014 Election Cycle-to-Date | Primary General 200.99 Other (specify) Full Name (Last, First, Middle Initial) WILLIAM CLEAVE DRUMMOND II Date of Receipt Mailing Address 1031-B NURSERY RD 22 2013 Citv State Zip Code Transaction ID: SA11D.4256 **CHIPLEY** FL 32425 FEC ID number of contributing C H2FL01209 Amount of Each Receipt this Period federal political committee. 65.00 Name of Employer Occupation Freelance Artist, Website Designer Personal Deposit Self Emplaoy Receipt For: 2014 Election Cycle-to-Date | Primary General 265.99

Other (specify) Full Name (Last, First, Middle Initial) WILLIAM CLEAVE DRUMMOND II Date of Receipt Mailing Address 1031-B NURSERY RD 2013 28 City State Zip Code Transaction ID: SA11D.4261 FL **CHIPLEY** 32425 FEC ID number of contributing C H2FL01209 Amount of Each Receipt this Period federal political committee. 30.64 Name of Employer Occupation Self Emplaoy Freelance Artist, Website Designer Gas used to go to even Receipt For: 2014 Election Cycle-to-Date | Y Primary General 296.63 Other (specify) 135.64 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 11 (check only one)

11a 11b 11c X 11d 11d 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DRUMMOND FOR CONGRESS Full Name (Last, First, Middle Initial) WILLIAM CLEAVE DRUMMOND II Date of Receipt Mailing Address 1031-B NURSERY RD 2013 09 City State Zip Code Transaction ID: SA11D.4257 FL 32425 **CHIPLEY** FEC ID number of contributing Amount of Each Receipt this Period H2FL01209 federal political committee. 28.00 Name of Employer Occupation Personal Deposit Self Emplaoy Freelance Artist, Website Designer Receipt For: 2014 Election Cycle-to-Date | Primary General 324.63 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 28.00 SUBTOTAL of Receipts This Page (optional)..... 163.64 TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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DANS		Detailed Summary Page	e (Crieck offly offe)
AME OF COMMITTEE (In Full) DRUMMOND FOR CONGRI	ESS	Transact	tion ID : SC/10.4174
RHONDA LEE DRUMMON		[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 1031-B NURSERY RD			Other (specify)
City	State ZIP (Code	
CHIPLEY	FL 3242	28	
Original Amount of Loan	Cumulative Payment	To Date Balar	nce Outstanding at Close of This Period
50	00	0.00	50.00
TERMS Date Incurred	Date Du	ue Interest Rate	Secured:
M03 ^M / D14 ^D / Y Ž01Ž	Y M M / D D /	^Y 12/30/2012 O.00	% (apr) Yes No
List All Endorsers or Guarantors (f any) to Loan Source		Tes No
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,
2. Full Name (Last, First, Middle Ini	iial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle Ini	iial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Ini	iial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (o	ptional)		50.00
TOTALS This Period (last page in this	line only)	· L	, , , , , , , ,
Carry outstanding balance only to LIN	E 3, Schedule D, for this line.	If no Schedule D, carry forw	ard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) DRUMMOND FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary WILLIAM CLEAVE DRUMMOND II General Mailing Address Other (specify) ullet1031-B NURSERY RD State ZIP Code City FL 32425 CHIPLEY Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 03 Ž012 12/30/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4130 NAME OF COMMITTEE (In Full) DRUMMOND FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary WILLIAM CLEAVE DRUMMOND II ★ General Mailing Address Other (specify) \blacktriangledown 1031-B NURSERY RD State ZIP Code City FL 32425 CHIPLEY Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50.00 0.00 50.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 03^M Ž012 12/30/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 50.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Detailed Summary Page Transaction ID: SC/10.4173 NAME OF COMMITTEE (In Full) DRUMMOND FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary WILLIAM CLEAVE DRUMMOND II General Mailing Address Other (specify) ullet1031-B NURSERY RD State ZIP Code City FL 32425 CHIPLEY Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 55.85 0.00 55.85 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M 03^M Ž012 12/30/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 55.85 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4146 NAME OF COMMITTEE (In Full) DRUMMOND FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary WILLIAM CLEAVE DRUMMOND II General Mailing Address Other (specify) ullet1031-B NURSERY RD State ZIP Code City FL 32425 CHIPLEY Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 121.00 0.00 121.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M ^D30 Ž012 12/30/2012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 121.00 TOTALS This Period (last page in this line only) 376.85 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.