

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

Powell for Congress

ADDRESS (number and street)

421 Branchway Rd

Check if different than previously reported. (ACC)

Richmond

VA

23236

2. FEC IDENTIFICATION NUMBER ▼

C C00497289

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

VA

07

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Mr. Frederick A. Hodnett Jr

Signature of Treasurer Mr. Frederick A. Hodnett Jr

[Electronically Filed]

Date

/ /

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 | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Powell 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)).... | 1698.07 | 9741.86 |
| (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))..... | 1698.07 | 9741.86 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 10035.00 | 47425.06 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 10035.00 | 47425.06 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 14899.31 | |
| 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)..... | 94897.88 | |

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

Powell 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)..... | 998.07 | 676862.65 |
| (ii) Unitemized..... | 0.00 | 25.29 |
| (iii) TOTAL of contributions from individuals ▶ | 998.07 | 9041.86 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 700.00 | 700.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 1698.07 | 9741.86 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 10000.00 |
| (b) All Other Loans..... | 500.00 | 1500.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 500.00 | 11500.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 428.55 | 428.55 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 2626.62 | 21670.41 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 10035.00 | 47425.06 |
| 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 | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 10035.00 | 47425.06 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 22307.69 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 2626.62 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 24934.31 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 10035.00 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 14899.31 |

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Fiona Ailor

Mailing Address 14064 Little Bear Ct.

City Montpelier State VA Zip Code 23192

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2012

Transaction ID : C6840518

Amount of Each Receipt this Period
 50.00

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

Mailing Address 656 Greer Rd

City Palo Alto State CA Zip Code 94303-3021

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

Name of Employer Information Requested Occupation Information Requested
 TAK Capital Management, Inc. President

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2012

Transaction ID : C6838693

Amount of Each Receipt this Period
 10.00

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

Mailing Address 8428 W Villard Ave

City Milwaukee State WI Zip Code 53225-3504

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

Name of Employer Information Requested Occupation Information Requested
 N/A Retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2012

Transaction ID : C6907047

Amount of Each Receipt this Period
 10.00

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

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

70.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Marcus Disbrow

Mailing Address 4230 Stackstone Dr

City State Zip Code
Cumming GA 30041-5644

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

Name of Employer Occupation
n/a retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
25.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 30 / 2012

Transaction ID : C6840259

Amount of Each Receipt this Period
25.00

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

Mailing Address 4506 Wythe Ave

City State Zip Code
Richmond VA 23221-1154

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

Name of Employer Occupation
Retired Personnel director

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
20.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 13 / 2012

Transaction ID : C6906105

Amount of Each Receipt this Period
10.00

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

Mailing Address 3217 Regatta Pointe Ct

City State Zip Code
Midlothian VA 23112-4624

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

Name of Employer Occupation
N/A Retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
75.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 28 / 2012

Transaction ID : C6839293

Amount of Each Receipt this Period
75.00

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

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

110.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Martha Gillis

Mailing Address 6614 Holford Ln

City Springfield State VA Zip Code 22152-2908

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

Name of Employer self Occupation psychologist

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2012

Transaction ID : C6838927

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Brian D. Hedges

Mailing Address 9268 Wynwood Ln

City Remington State VA Zip Code 22734-1755

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

Name of Employer N/A Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2012

Transaction ID : C6839060

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Brian D. Hedges

Mailing Address 9268 Wynwood Ln

City Remington State VA Zip Code 22734-1755

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

Name of Employer N/A Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2012

Transaction ID : C6907795

Amount of Each Receipt this Period
 25.00

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

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

75.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Carole Heffernan

Mailing Address 660 Red Pine Ln

City Eagan State MN Zip Code 55123-2344

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

Name of Employer self Occupation consultant

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2012

Transaction ID : C6839454

Amount of Each Receipt this Period
 10.00

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

Mailing Address 5165 Placid Way

City Dallas State TX Zip Code 75244-7922

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

Name of Employer ATT Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2012

Transaction ID : C6907048

Amount of Each Receipt this Period
 25.00

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

Mailing Address PO Box 24325

City Nashville State TN Zip Code 37202-4325

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

Name of Employer Self Occupation Musician

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2012

Transaction ID : C6907046

Amount of Each Receipt this Period
 10.00

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

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

45.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
RENA MARTIN-ERRICK

Mailing Address 138 Twin Oaks Rd
D-4

City Louisa State VA Zip Code 23093-6337

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

Name of Employer none Occupation retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2012

Transaction ID : C6839051

Amount of Each Receipt this Period
 10.00

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

Mailing Address 3213 S Battlebridge Dr

City Richmond State VA Zip Code 23224

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

Name of Employer Virginia Commonwealth University Occupation Instructor

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2012

Transaction ID : C6906985

Amount of Each Receipt this Period
 25.00

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

Mailing Address 3901 Kippax Dr

City Hopewell State VA Zip Code 23860-5318

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

Name of Employer Defense Logistics Agency - Aviation Occupation Inventory Management Specialist

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2012

Transaction ID : C6905312

Amount of Each Receipt this Period
 25.00

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

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

60.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Donald James Mollenhauer II

Mailing Address 4201 Holly Fork Rd

City Barhamsville State VA Zip Code 23011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2012

Transaction ID : C6906219

Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
Jerry P. Owen

Mailing Address 9090 Nesselwood Cir

City Mechanicsville State VA Zip Code 23116

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Transaction ID : C6906213

Amount of Each Receipt this Period
 250.00

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

Mailing Address 325 E Addison St

City Jackson State MI Zip Code 49203-4305

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

Name of Employer Information Requested Occupation Information Requested

N/A Retired

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 / 24 / 2012

Transaction ID : C6907736

Amount of Each Receipt this Period
 25.00

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

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

325.00

**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 44 |
| | <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)
Powell for Congress

| | | | |
|--|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. John Rambo | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2012 | |
| Mailing Address 2193 Roan Ct | | Transaction ID : C6910009 | |
| City Livermore | State CA | Zip Code 94551-5423 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Retired & Lawrence Livermore Nat Lab | Occupation Physicist/Archivist | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt General | Election Cycle-to-Date 100.00 | | |

| | | | |
|--|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Bonnie Reid | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 03 / 2012 | |
| Mailing Address 138 Barnes Spring Road | | Transaction ID : C6906217 | |
| City Midlothian | State VA | Zip Code 23112 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt General | Election Cycle-to-Date 100.00 | | |

| | | | |
|--|--------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Patricia R Jack | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 27 / 2012 | |
| Mailing Address 4021 David Lane | | Transaction ID : C6906235A | |
| City Alexandria | State VA | Zip Code 22311-1110 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 6.25 | |
| Name of Employer none | Occupation not employed | | |
| Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt General | Election Cycle-to-Date 6.25 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 206.25 |
| TOTAL This Period (last page this line number only)..... | 206.25 |

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2012

Transaction ID : C6906235AB

Amount of Each Receipt this Period
6.25

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 13385 HARPERS FERRY RD

City State Zip Code
PURCELLVILLE VA 20132

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

Name of Employer Occupation
PRESTO DIRECT, INC. SMALL BUSINESS OWNER

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
15.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 27 / 2012

Transaction ID : C6906233A

Amount of Each Receipt this Period
15.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2012

Transaction ID : C6906233AB

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

15.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Janet Meredith

Mailing Address 2350 NW Rolling Green

City Corvallis State OR Zip Code 97330-3969

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

Name of Employer retired Occupation none

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2012

Transaction ID : C6906234A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2012

Transaction ID : C6906234AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 1732 Early Setters Road

City N. Chesterfield State VA Zip Code 23235

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

Name of Employer ccps Occupation retired teacher

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : C6910758A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

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

75.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2012

Transaction ID : C6910758AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 4504 NE 35th Place

City State Zip Code
Portland OR 97211

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

Name of Employer Occupation
self producer

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : C6906238A

Amount of Each Receipt this Period
10.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2012

Transaction ID : C6906238AB

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

10.00

**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 15 OF 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Jeremy Trabue

Mailing Address 3723 SE 66th Ave

City Portland State OR Zip Code 97206

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

Name of Employer Chemeketa Community College Occupation English Professor

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
5.26

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2012

Transaction ID : C6906236A

Amount of Each Receipt this Period
5.26

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2012

Transaction ID : C6906236AB

Amount of Each Receipt this Period
5.26

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 1400 East-West Hey, #1228

City Silver Spring State MD Zip Code 20910

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

Name of Employer Self Occupation Entrepreneur

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
3.12

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : C6910762A

Amount of Each Receipt this Period
1.56

* Earmarked Contribution: See Below

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

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

6.82

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
113.07

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 23 / 2012

Transaction ID : C6910762AB

Amount of Each Receipt this Period
1.56

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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 / 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 / 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).....

0.00

998.07

**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 44 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Ernest Wayne Powell

Mailing Address 104 Durrington Pl

City Richmond State VA Zip Code 23236

FEC ID number of contributing federal political committee. **C** H2VA07113

Name of Employer Powell and Parrish, LLC Occupation attorney at law

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2012

Transaction ID : C6840293

Amount of Each Receipt this Period
700.00

* In-Kind: HQ Rent

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 / 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 / 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).....

700.00

700.00

**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 44 |
| | <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)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Caroline S. Rock

Mailing Address P.O. Box 5252

City State Zip Code
Glen Allen VA 23058

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

Name of Employer none Occupation retired

Receipt For: 2012
 Primary General
 Other (specify) Debt General

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2012

Transaction ID : C6910010

Amount of Each Receipt this Period
500.00

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 / 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 / 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).....

500.00

500.00

**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 44 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Powell for Congress

A. Full Name (Last, First, Middle Initial)
Enclave Apartments

Mailing Address 13320 Enclave Dr

City Midlothian State VA Zip Code 23114-5565

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2012

Transaction ID : C6910751

Amount of Each Receipt this Period
 24.80

B. Full Name (Last, First, Middle Initial)
Young Broadcasting of Richmond

Mailing Address 301 Arboretum Place

City Richmond State VA Zip Code 23236

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2012

Transaction ID : C6906279

Amount of Each Receipt this Period
 403.75

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).....

428.55

428.55

**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 44 | |
| | <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)
Powell for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Michael Brown | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 1506 Jacquelin Street | | Amount of Each Disbursement this Period 1000.00 Transaction ID : D390116 |
| City Richmond | State VA Zip Code 23220 | |
| Purpose of Disbursement consulting fees | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) final payment | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Cox Media Group | | Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012 |
| Mailing Address 812 Moorefield Park Dr | | Amount of Each Disbursement this Period 1020.00 Transaction ID : D393038 |
| City North Chesterfield | State VA Zip Code 23236-3684 | |
| Purpose of Disbursement media costs | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) final 10/29-11/6radi | |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Thomas Durst | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2012 |
| Mailing Address 1071 Vallejo St | | Amount of Each Disbursement this Period 558.00 Transaction ID : D390728 |
| City San Francisco | State CA Zip Code 94133-3619 | |
| Purpose of Disbursement reimbursement for excessive contribution | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) donated more than al | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2578.00 |
| 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 21 OF 44 | | | |
| | <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)
Powell for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ernest Wayne Powell | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2012 |
| Mailing Address 104 Durrington Pl | | Amount of Each Disbursement this Period 700.00 Transaction ID : D390630 |
| City Richmond | State VA Zip Code 23236 | |
| Purpose of Disbursement HQ Rent | | * In-Kind Received |
| Candidate Name Ernest Wayne Powell | | |
| Office Sought: <input checked="" type="checkbox"/> House | Disbursement For: 2012 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| <input type="checkbox"/> President | <input type="checkbox"/> Other (specify) | |
| State: VA District: 07 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ernest Wayne Powell | | Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2012 |
| Mailing Address 104 Durrington Pl | | Amount of Each Disbursement this Period 300.00 Transaction ID : D393229 |
| City Richmond | State VA Zip Code 23236 | |
| Purpose of Disbursement ATM withdrawal for office maintenance | | Category/Type |
| Candidate Name Ernest Wayne Powell | | |
| Office Sought: <input checked="" type="checkbox"/> House | Disbursement For: 2012 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input type="checkbox"/> General | |
| <input type="checkbox"/> President | <input checked="" type="checkbox"/> Other (specify) after campaign repai | |
| State: VA District: 07 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. First Bank | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 1500 W. Main St. | | Amount of Each Disbursement this Period 2336.33 Transaction ID : D394399 |
| City Carbondale | State IL Zip Code 62901 | |
| Purpose of Disbursement merchant fees | | Category/Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House | Disbursement For: 2012 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input type="checkbox"/> General | |
| <input type="checkbox"/> President | <input checked="" type="checkbox"/> Other (specify) after election donat | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3336.33 |
| 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 44 | | | |
| | <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)
Powell for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. First Bank | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 1500 W. Main St. | | Amount of Each Disbursement this Period 347.62 Transaction ID : D394401 |
| City Carbondale | State IL | |
| Zip Code 62901 | Purpose of Disbursement merchant fees | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | State: District: | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input checked="" type="checkbox"/> Other (specify) after election donat | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. First Bank | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 1500 W. Main St. | | Amount of Each Disbursement this Period 223.17 Transaction ID : D394402 |
| City Carbondale | State IL | |
| Zip Code 62901 | Purpose of Disbursement merchant fees | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | State: District: | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input checked="" type="checkbox"/> Other (specify) after election donat | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Google, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012 |
| Mailing Address 1600 Amphitheatre Parkway | | Amount of Each Disbursement this Period 100.00 Transaction ID : D394403 |
| City Mountain View | State CA | |
| Zip Code 94043 | Purpose of Disbursement campaign e-mails | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | State: District: | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input checked="" type="checkbox"/> Other (specify) monthly email paymen | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 670.79 |
| 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 44 | | | |
| | <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)
Powell for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Hodges Graphic Design | | Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012 |
| Mailing Address PO Box 1018 | | Amount of Each Disbursement this Period 60.00 Transaction ID : D390729 |
| City Ashland State VA Zip Code 23005 | Purpose of Disbursement invitations for fund raiser | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) late payment | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Lowes | | Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2012 |
| Mailing Address 6425 Mechanicsville Tpke | | Amount of Each Disbursement this Period 27.28 Transaction ID : D393228 |
| City Mechanicsville State VA Zip Code 23111 | Purpose of Disbursement Supplies | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) sign removal equipme | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Monticello Media | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012 |
| Mailing Address 1150 Pepsi Pl | | Amount of Each Disbursement this Period 1152.60 Transaction ID : D393036 |
| City Charlottesville State VA Zip Code 22901-2865 | Purpose of Disbursement media costs | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nov.1-6 radio ads | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1239.88 |
| 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 44 | | | |
| | <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)
Powell for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth Whissel Naylor | | Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012 |
| Mailing Address 101 North 5th Street, Apt. 715 | | Amount of Each Disbursement this Period 760.00 Transaction ID : D393037 |
| City Richmond State VA Zip Code 23219 | Purpose of Disbursement consulting fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) compliance work | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth Whissel Naylor | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012 |
| Mailing Address 101 North 5th Street, Apt. 715 | | Amount of Each Disbursement this Period 370.00 Transaction ID : D394396 |
| City Richmond State VA Zip Code 23219 | Purpose of Disbursement consulting fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) compliance work | |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. James Pollock | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address 1417 Key Blvd Apt 208 Apt 208 | | Amount of Each Disbursement this Period 679.00 Transaction ID : D393230 |
| City Arlington State VA Zip Code 22209 | Purpose of Disbursement consulting fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) final salary payment | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1809.00 |
| 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 25 OF 44 | | | |
| | <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)
Powell for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Zanas Talley | | Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2012 |
| Mailing Address 729 Sturgis Dr. | | Amount of Each Disbursement this Period 360.00 Transaction ID : D394395 |
| City Richmond | State VA Zip Code 23236 | |
| Purpose of Disbursement consulting fees | Candidate Name | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) final salary payment | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. USPS | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address 475 L Enfant Pl SW Rm 4012 | | Amount of Each Disbursement this Period 18.00 Transaction ID : D394405 |
| City Washington | State DC Zip Code 20060-0001 | |
| Purpose of Disbursement postage | Candidate Name | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) post election letter | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. wells fargo | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012 |
| Mailing Address P. O. Box 6995 | | Amount of Each Disbursement this Period 20.00 Transaction ID : D394407 |
| City Portland | State OR Zip Code 97228 | |
| Purpose of Disbursement monthly service fee | Candidate Name | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) low minimum balance | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 398.00 |
| 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 26 OF 44 | | |
| | <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)
Powell for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. wells fargo | | Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012 |
| Mailing Address P. O. Box 6995 | | Amount of Each Disbursement this Period 3.00 |
| City Portland | State OR | |
| Zip Code 97228 | Purpose of Disbursement bank fees | Transaction ID : D394404 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) for reconciliation | |
| 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 | |
| Candidate Name | Category/ Type | |
| 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 | |
| Candidate Name | Category/ Type | |
| 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)..... | 3.00 |
| TOTAL This Period (last page this line number only)..... | 10035.00 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : **L548**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Edward Hart RiceJr PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
2217 Halcyon Ln
 City State ZIP Code
 Vienna VA 22181-3042

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 2500.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 2500.00 |
|------------------------------------|------------------------------------|--|

TERMS
 Date Incurred: M 06 / D 20 / Y 2012
 Date Due: M / D / Y no due date
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 2500.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : **L549**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Nancy Angland Rice PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
2217 Halcyon Ln

City State ZIP Code
Vienna VA 22181

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 2500.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 2500.00 |
|------------------------------------|------------------------------------|--|

TERMS

Date Incurred: M 06 / D 26 / Y 2012
Date Due: M / D / Y no due date
Interest Rate: 0.00 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 2500.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : **L590**

| | |
|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Rachel A Rice PERS FUNDS | Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 2217 Halcyon Lane | |

| | | |
|--------|-------|----------|
| City | State | ZIP Code |
| Vienna | VA | 22181 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 2500.00 | 0.00 | 2500.00 |

TERMS

| | | | |
|------------------------|-----------------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 08 / D 17 / Y 2012 Y | M M / D D / Y no due date Y | none % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
|--|--|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/> |

| | |
|--|---|
| SUBTOTALS This Period This Page (optional)..... | <input style="width: 100%;" type="text" value="2500.00"/> |
| TOTALS This Period (last page in this line only)..... | <input style="width: 100%;" type="text"/> |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : **L593**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
85000.00 78100.00 6900.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 6900.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : **L620**

| | | |
|---|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Ernest Wayne Powell PERS FUNDS | [PERSONAL FUNDS] | Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 104 Durrington Pl | | |

| | | |
|----------|-------|----------|
| City | State | ZIP Code |
| Richmond | VA | 23236 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 1292.69 | 0.00 | 1292.69 |

TERMS

| | | | |
|----------------------|----------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 03 / D 26 / Y 2011 | M / D / Y none | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | | |
|--|---|---------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | 1292.69 |
| TOTALS This Period (last page in this line only)..... | ▶ | [] |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : **L624**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 18000.00 32000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 32000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : L625

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012
Ernest Wayne Powell PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl
 City Richmond State VA ZIP Code 23236

| | | |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan 10000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 10000.00 |
|-------------------------------------|------------------------------------|---|

TERMS
 Date Incurred: M 11 / D 19 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L626

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
160.00 0.00 160.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 06 / D 05 / Y 2011 M M / D D / Y none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 160.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L627

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 5507.92 | 0.00 | 5507.92 |

TERMS

Date Incurred: M 08 / D 28 / Y 2011
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | | |
|--|---|---------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | 5507.92 |
| TOTALS This Period (last page in this line only)..... | ▶ | [] |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L628

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
6198.43 0.00 6198.43

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 04 / Y 2011 M M / D D / Y none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 6198.43

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L631

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : **L634**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 24 / Y 2012 M M / D D / Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : L635

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012
Ernest Wayne Powell PERS FUNDS Primary
 Mailing Address 104 Durrington Pl General
 Other (specify) ▼

City State ZIP Code
 Richmond VA 23236

| | | |
|------------------------------------|------------------------------------|--|
| Original Amount of Loan 5000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 5000.00 |
|------------------------------------|------------------------------------|--|

TERMS

| | | | |
|---------------------------------------|--------------------------------|-------------------------------|---|
| Date Incurred M 01 / D 20 / Y 2012 | Date Due M M / D D / Y none | Interest Rate none % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------------|--------------------------------|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | | |
|--|---|-------------|
| SUBTOTALS This Period This Page (optional)..... | ▶ | [] 5000.00 |
| TOTALS This Period (last page in this line only)..... | ▶ | [] |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : **L639**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Ernest Wayne Powell PERS FUNDS
 Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City Richmond State VA ZIP Code 23236

| | | |
|-------------------------------------|--|---|
| Original Amount of Loan 50000.00 | Cumulative Payment To Date 40000.00 | Balance Outstanding at Close of This Period 10000.00 |
|-------------------------------------|--|---|

TERMS

Date Incurred: M 06 / D 08 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L640

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2155.79 0.00 2155.79

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 31 / Y 2012 M M / D D / Y none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 2155.79

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L641

LOAN SOURCE Full Name (Last, First, Middle Initial)
Ernest Wayne Powell PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
104 Durrington Pl

City State ZIP Code
Richmond VA 23236

| | | |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan 683.05 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 683.05 |
|-----------------------------------|------------------------------------|---|

TERMS

Date Incurred: M 04 / D 30 / Y 2012
Date Due: M M / D D / Y none
Interest Rate: none % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

SUBTOTALS This Period This Page (optional)..... ▶ 683.05

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Powell for Congress

Transaction ID : L651

LOAN SOURCE Full Name (Last, First, Middle Initial)
Caroline S. Rock PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
P.O. Box 5252

City State ZIP Code
Glen Allen VA 23058

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
500.00 0.00 500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 15 / Y 2012 M M / D D / Y none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
|--|--------------------------------|
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶ 500.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Powell for Congress** Transaction ID : L652

| | | |
|--|-------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Garner Anthony PERS FUNDS | [PERSONAL FUNDS] | Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address P.O. Box 947 | | |

| | | |
|---------|-------|----------|
| City | State | ZIP Code |
| Bonsall | CA | 92003 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 1000.00 | 0.00 | 1000.00 |

TERMS

| | | | |
|----------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 11 / 19 / 2012 | none | none % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|--|----------|
| SUBTOTALS This Period This Page (optional)..... | 1000.00 |
| TOTALS This Period (last page in this line only)..... | 94897.88 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.