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Image# 14961643969

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Com	nmittee			Office Use Only
NAME OF COMMITTEE (in fi	TYPE OR PRIN		cample: If typin	g, type	12FE4M5	
Howie Lind for (	Congress					
I						
	PO Box 878					
ADDRESS (number and						
Check if diffe						
than previous reported. (AC					L VA	22101
2. <b>FEC IDENTIFICA</b>	ATION NUMBER \(\nbeggreen\)	CITY			STATE A	ZIP CODE
C C00557983		3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	STATE ▼ DISTRICT  DED  VA 10
4 TYPE OF BER	ORT (Choose One)					
(a) Quarterly Rep	,	(b) 12-Day <b>PRE</b>	E-Election Repo	ort for the:		
			Primary (12P	)	General (1	2G) Runoff (12R)
	Quarterly Report (Q1)		Convention (	12C)	Special (1	2S)
<b>X</b> July 15 0	Quarterly Report (Q2)		M M	D D /	V V V V	is the
October	15 Quarterly Report (Q3)	Election on	/			in the State of
January 3	31 Year-End Report (YE)	(c) 30-Day <b>POS</b>	<b>ST</b> -Election Rep	oort for the:		
			General (30G	i)	Runoff (30	Special (30S)
Termination	on Report (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D 07	2014	through	M M M	/ D D /	Y Y Y Y Y 2014
I certify that I have exa	amined this Report and to	o the best of my ki	nowledge and	belief it is tr	ue, correct and	l complete.
Type or Print Name of	Treasurer Michael Rum	berg				
Signature of Treasurer	Michael Rumberg		[Electronically l	Filed] [	Date 07	/ 16 / Y Y Y Y Y Y Y 2014
NOTE: Submission of fa	alse, erroneous, or incompl	ete information may	subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

of Receipts and Disbursements

2014

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2014

06

To:

30

FEC Form 3 (Revised 02/2003)

From:

Write or Type Committee Name

Report Covering the Period:

Howie Lind for Congress

07

**COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 9035.00 25625.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 5793.25 5793.25 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 3241.75 19831.75 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 34200.02 173083.29 (from Line 17) ..... (b) Total Offsets to Operating 2225.50 2288.04 Expenditures (from Line 14)..... (c) Net Operating Expenditures 31974.52 170795.25 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 3311.50 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 151300.00 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

#### **Howie Lind for Congress**

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1. CONTE	RIBUTIONS (other than loans) FROM:				
` '	dividuals/Persons Other Than				
(i)	olitical Committees Itemized (use Schedule A)	6825.00	21725.00		
(ii)		2210.00	3900.00		
(iii	i) TOTAL of contributions from individuals	9035.00	25625.00		
	olitical Party Committees	0.00	0.00		
` '	ther Political Committees uch as PACs)	0.00	0.00		
(e) T(	ne Candidate	0.00	0.00		
	ther than loans) dd Lines 11(a)(iii), (b), (c), and (d))	9035.00	25625.00		
	SFERS FROM OTHER ORIZED COMMITTEES	0.00	0.00		
3. LOANS					
. ,	ade or Guaranteed by the andidate	21300.00	151300.00		
, ,	Il Other Loans	0.00	0.00		
` '	OTAL LOANS dd Lines 13(a) and (b))	21300.00	151300.00		
	ETS TO OPERATING				
	ds, Rebates, etc.)	2225.50	2288.04		
	R RECEIPTS ends, Interest, etc.)	3000.00	3000.00		
11(e),	RECEIPTS (add Lines 12, 13(c), 14, and 15) Total to Line 24, page 4)	35560.50	182213.04		

#### **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	34200.02	173083.29
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	5793.25	5793.25
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	5793.25	5793.25
21.	OTHER DISBURSEMENTS	25.00	25.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	40018.27	178901.54
	III. CASH SI	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	7769.27
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	35560.50
5.	SUBTOTAL (add Line 23 and Line 24)		43329.77
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	40018.27
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	3311.50

FOR LINE NUMBER: **PAGE** 5 OF 37 (check only one) 11a 11b 11c 12

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 14 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Angelo C Bianco Date of Receipt Mailing Address 6816 Wemberly Way 2014 24 City State Zip Code Transaction ID: SA11AI.4558 VA 22101 Mclean FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) Jeffrey Bothen Date of Receipt Mailing Address 8220 McNeil St 27 2014 City State Zip Code Transaction ID: SA11AI.4519 Vienna VA 22180 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 350.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) Antoinette B Buchanan Date of Receipt Mailing Address 7744 Frytown Rd 2014 16 City Zip Code State Transaction ID: SA11AI.4548 VA Warrenton 20187 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **Buchanan Contracting** General Contractor Contribution Receipt For: 2014 Election Cycle-to-Date | Y Primary General Other (specify) 500.00 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: **PAGE** 6 OF 37 (check only one) 11a 11b 11c Detailed Summary Page 12 13a 13b 14

Use separate schedule(s) for each category of the 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) **Thomas Carter** Date of Receipt Mailing Address 2032 Ashburton Way 2014 80 City State Zip Code Transaction ID: SA11AI.4475 SC 29466 Mount Pleasant FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution Elbit Systems of America Government Relations Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Carl P Cecil Date of Receipt Mailing Address 4616 Sutton Oaks Dr 10 2014 City State Zip Code Transaction ID: SA11AI.4525 Chantilly VA 20151 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Sales Contribution Schneider Electric Receipt For: 2014 Election Cycle-to-Date | Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) Carl P Cecil Date of Receipt Mailing Address 4616 Sutton Oaks Dr 2014 23 City State Zip Code Transaction ID: SA11AI.4553 VA Chantilly 20151 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Schneider Electric Sales Contribution Receipt For: 2014 Election Cycle-to-Date ✓ Primary General Other (specify) 1450.00 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF 37 (check only one) 11a 11b 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Carl P Cecil Date of Receipt Mailing Address 4616 Sutton Oaks Dr 2014 24 City State Zip Code Transaction ID: SA11AI.4521 VA 20151 Chantilly FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Contribution Schneider Electric Sales Receipt For: 2014 Election Cycle-to-Date Primary General 1950.00 Other (specify) Full Name (Last, First, Middle Initial) Ronald Christenson Date of Receipt Mailing Address 43279 Warwick hills Ct 21 2014 City State Zip Code Transaction ID: SA11AI.4512 Leesburg VA 20176 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 150.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) George Folsom Date of Receipt Mailing Address 5207 Falmouth Rd 2014 13 City Zip Code State Transaction ID: SA11AI.4493 MD Bethesda 20816 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Siward Newton Managing Director Contribution Receipt For: 2014 Election Cycle-to-Date | Y Primary General 500.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF 37 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c Detailed Summary Page 12 13a 13b

ITEMIZED RECEIPTS 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Ron Grignol Date of Receipt Mailing Address 5241 Ballycastle Cir 2014 13 City State Zip Code Transaction ID: SA11AI.4502 VA 22315 Alexandria FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution **JRC** Engineer Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Chas M Holland Jr Date of Receipt Mailing Address 1522 Sadlers Wells Dr 07 2014 Citv State Zip Code Transaction ID: SA11AI.4471 Herndon VA 20170 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Ringo Lanzetti Date of Receipt Mailing Address 6674 Van Winkle Dr 2014 12 City State Zip Code Transaction ID: SA11AI.4491 VA Falls Church 22044 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation SSI Owner Contribution Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 250.00 1000.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: **PAGE** 9 OF 37 (check only one) 11a 11b 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Harold Morgan Date of Receipt Mailing Address 18 31st Street 2014 10 City State Zip Code Transaction ID: SA11AI.4487 MS 39507 Gulfport FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution **Election Impact Grop** Political Consultant Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Harold Morgan Date of Receipt Mailing Address 18 31st Street 05 2014 City State Zip Code Transaction ID: SA11AI.4574 Gulfport MS 39507 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 75.00 Name of Employer Occupation Political Consultant Contribution **Election Impact Grop** Receipt For: 2014 Election Cycle-to-Date | Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) Joe Ressa Date of Receipt Mailing Address 704 S Stewart St 2014 16 City State Zip Code Transaction ID: SA11AI.4543 VA Winchester 22601 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Ressabuilt Builder Contribution Receipt For: 2014 Election Cycle-to-Date | Y Primary General Other (specify) 350.00 575.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: **PAGE** 10 OF 37 (check only one) 11a 11b 11d 11c 12 13a 13b 14

Use separate schedule(s) for each category of the Detailed Summary Page 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) Anna M Ross Date of Receipt Mailing Address 6710 Van Fleet Dr 2014 16 City State Zip Code Transaction ID: SA11AI.4546 VA 22101 Mclean FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) David Van Wagoner Date of Receipt Mailing Address 2605 Lecompte Ln 19 2014 Citv State Zip Code Transaction ID: SA11AI.4510 Davidsonville MD 21035 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Engineer Contribution **TASC** Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas West Date of Receipt Mailing Address 16408 Freemont Ln 2014 80 City State Zip Code Transaction ID: SA11AI.4477 VA Purcellville 20132 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation One Thing Executive Contribution Receipt For: 2014 Election Cycle-to-Date | Y Primary General Other (specify) 250.00 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 11 OF (check only one) 11a 11b 11d 11c

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 12 13a 13b 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) **Durbin Williams** Date of Receipt Mailing Address 107 Proclamation Dr 2014 15 City State Zip Code Transaction ID: SA11AI.4538 VA 22603 Winchester FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Contribution Retired Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) John Charles Williams Date of Receipt Mailing Address 589 Westfield Rd 16 2014 City State Zip Code Transaction ID: SA11AI.4539 Toquerville UT 64774 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Retired Contribution Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 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) 500.00 SUBTOTAL of Receipts This Page (optional)..... 6825.00 TOTAL This Period (last page this line number only).....

SC	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF 37 (check only one)
Τ	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 11d 11d 12 X 13a 13b 14 15
	ny information copied from such Reports and St			person for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Howie Lind for Congress			
Δ	Full Name (Last, First, Middle Initial) Howard Rhodes Lind			Date of Receipt
	Mailing Address 1313 Rockland Terrace			04 08 2014
	City Mclean	State VA	Zip Code 22101	Transaction ID : SA13A.4586
	FEC ID number of contributing federal political committee.	С на	VA10121	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	1	Loan by Candidate
			ycle-to-Date 141000.00	
В.	Full Name (Last, First, Middle Initial) Howard Rhodes Lind Mailing Address 1313 Rockland Terrace			Date of Receipt
	City State		Zip Code	04 29 2014
	,		•	
	Mclean	VA	22101	Transaction ID : SA13A.4563
		VA	· ·	Amount of Each Receipt this Period
	Mclean  FEC ID number of contributing federal political committee.  Name of Employer	C H41	22101 VA10121	Amount of Each Receipt this Period
	Mclean  FEC ID number of contributing federal political committee.	C H41 Occupation	22101 VA10121	Amount of Each Receipt this Period
	Mclean  FEC ID number of contributing federal political committee.  Name of Employer  Retired  Receipt For: 2014  Primary General	C H41 Occupation	vA10121  vycle-to-Date	Amount of Each Receipt this Period  10300.00  Loan from Candidate
<b>C</b> .	Mclean  FEC ID number of contributing federal political committee.  Name of Employer  Retired  Receipt For: 2014  Primary General Other (specify)	C H41 Occupation	22101 VA10121 vycle-to-Date	Amount of Each Receipt this Period
<b>c</b> .	Mclean  FEC ID number of contributing federal political committee.  Name of Employer  Retired  Receipt For: 2014  Primary General  Other (specify)  Full Name (Last, First, Middle Initial)	C H41 Occupation	22101 VA10121 vycle-to-Date	Amount of Each Receipt this Period  10300.00  Loan from Candidate  Date of Receipt
c.	Mclean  FEC ID number of contributing federal political committee.  Name of Employer Retired Receipt For: 2014  Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Mailing Address	VA  C H4  Occupation Retired Election C	22101 VA10121 Tycle-to-Date	Amount of Each Receipt this Period  10300.00  Loan from Candidate  Date of Receipt
C.	Mclean  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: 2014  Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing	VA C H4Y Occupation Retired Election C	22101 VA10121  vycle-to-Date  151300.00  Zip Code	Amount of Each Receipt this Period  10300.00  Loan from Candidate  Date of Receipt
C.	Mclean  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: 2014  Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.	VA C H4Y Occupation Retired Election C State C Occupation	22101 VA10121  vycle-to-Date  151300.00  Zip Code	Amount of Each Receipt this Period  10300.00  Loan from Candidate  Date of Receipt
s	Mclean  FEC ID number of contributing federal political committee.  Name of Employer Retired Receipt For: 2014  Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General	VA C H4Y Occupation Retired Election C State C Occupation Election C	Zip Code  Zip Code	Amount of Each Receipt this Period  10300.00  Loan from Candidate  Date of Receipt

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:					PAGE	. 1	I3 OF		37
Use separate schedule(s)		(check only one)								
for each category of the Detailed Summary Page		11a		11b		11c		11d		
		12		13a		13b	X	14		15
not be sold or used by any person for the purpose of soliciting contributions										

					, 0		12	13a	13b   2	<b>X</b>   14	15	
	ny information copied from such Reports and St for commercial purposes, other than using the											
$\rangle$	NAME OF COMMITTEE (In Full) Howie Lind for Congress											
۱.	Full Name (Last, First, Middle Initial) Richard B Wirthlin Family Trust, LLC  Mailing Address 11180 Sunrise Valley Drive # 300  City State Zip Code						Date of Receipt  05 21 2014					
	City	State VA				Ŀ	Transacti	on ID : S	A14.4576			
	Reston  FEC ID number of contributing federal political committee.	C	2019	91			Amount	of Each	Receipt this	Period 2125.5	0	
	Name of Employer	Occupation	1				Prorated	refund of	rent	2123.3	o .	
	Receipt For: 2014  Primary General Other (specify)	Election C	ycle-to-Da	ite	2125.50							
	Full Name (Last, First, Middle Initial)						Date of	Receipt				
5.	Mailing Address						M M	/ D	D / Y	Y   Y   Y	1	
	City	State	Zip C	Code								
	FEC ID number of contributing federal political committee.	C					Amount	of Each	Receipt this	s Period	-	
	Name of Employer	Occupation	1				-		-		-	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Da	ite								
	Full Name (Last, First, Middle Initial)						Date of	Receipt				
<i>,</i>	Mailing Address						M I M	/ D	D / Y	YYYY	1	
	City	State	Zip C	Code								
	FEC ID number of contributing federal political committee.	С					Amount	of Each	Receipt this	s Period	_	
	Name of Employer	Occupation	1					-	-			
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Da	te		]						
S	SUBTOTAL of Receipts This Page (optional)								.,.	2125.50	)	
т	OTAL This Period (last page this line number o	nlv)								2125.50	0	

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

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

FOR LINE NUMBER: PAGE 14 OF 37 (check only one)

11a 11b 11c 11d 11d 12 13a 13b 14 X 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) **Howie Lind for Congress** Full Name (Last, First, Middle Initial) 10TH DISTRICT REPUBLICAN CONGRESSIONAL COMMITTEE Date of Receipt Mailing Address PO BOX 650552 2014 29 City State Zip Code Transaction ID: SA15.4561 VA 20165 POTOMAC FALLS FEC ID number of contributing Amount of Each Receipt this Period C00005462 federal political committee. 3000.00 Name of Employer Occupation Refund of Contribution Receipt For: 2014 Election Cycle-to-Date | Primary General 3000.00 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) 3000.00 SUBTOTAL of Receipts This Page (optional)..... 3000.00 TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBE	R:	PAG	E 15	OF	37
Use separate schedule(s)	(check on	ly one)					
for each category of the Detailed Summary Page	×	17	18		19a		19b
Detailed Suffillary Page		20a	20b		20c		21
ay not be sold or used by any address of any political commit	•				_		

TEMIZED DISBURSEMENTS	for each category Detailed Summary		X   17   18   19a   19b   20a   20b   20c   21			
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and						
NAME OF COMMITTEE (In Full) Howie Lind for Congress						
Full Name (Last, First, Middle Initial)  A. Barchetta Enterprises, LC		Date of Disbursement				
Mailing Address 7138 Little River TP # 210			05 13 2014			
City State Annandale VA	Zip Code 22003		Amount of Each Disbursement this Period			
Purpose of Disbursement Accounting and Compliance Consultant		001	2500.00 Transaction ID : SB17.4450			
Candidate Name		Category/ Type	Trained state in Experience			
Office Sought:  House Senate President  State:  Disbursement For Primary Other (		, , , , , , , , , , , , , , , , , , ,				
Full Name (Last, First, Middle Initial)  Brews and Bones Rest			Date of Disbursement			
Mailing Address 44630 Waxpool Rd	30 Waxpool Rd					
City State Ashburn VA	Zip Code 20147		Amount of Each Disbursement this Period			
Purpose of Disbursement Election night food for staff		001	450.60  Transaction ID : SB17.4433			
Candidate Name		Category/ Type				
State: District: Full Name (Last, First, Middle Initial)						
C. Broad Aspect			Date of Disbursement			
Mailing Address 44927 George Washington Blvd			05 06 7 2014			
Ashburn VA 2	Zip Code 20147		Amount of Each Disbursement this Period			
Purpose of Disbursement Internet service fee		001	199.00			
Candidate Name		Category/ Type	Transaction ID : SB17.4453			
Office Sought:  House Senate President  State:  Disbursement Fo  Other (						
SUBTOTAL of Disbursements This Page (optional)			3149.60			
TOTAL This Period (last page this line number only)						

**PAGE** 16 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Election Impact Group 2014 Mailing Address 18 31st St 10 City State Zip Code Amount of Each Disbursement this Period MS Gulfport 39057 Purpose of Disbursement 843.94 Campaign Manager fee & reimburse vehicle fuel 001 Transaction ID: SB17.4385 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Election Impact Group Date of Disbursement Mailing Address 18 31st St 04 14 2014 City State Zip Code Amount of Each Disbursement this Period MS 39057 Gulfport 217.28 Purpose of Disbursement Reimburse mileage expense 002 Transaction ID: SB17.4404 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Election Impact Group Mailing Address 18 31st St 04 2014 19 City State Zip Code Amount of Each Disbursement this Period 39057 Gulfport MS Purpose of Disbursement 204.86 Political consultant fee & reimburse mileage 001 Transaction ID : SB17.4420 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) State: District: 1266.08 SUBTOTAL of Disbursements This Page (optional).....

**1mage# 14961643985** PAGE 17 / 37

#### : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SB17 Transaction ID: SB17.4385

\$750 campaign manager fee and \$93.94 gas

Form/Schedule: Transaction ID:

### ITEMIZED DISBURSEMENTS

**PAGE** 18 37 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **X** 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Election Impact Group 2014 Mailing Address 18 31st St 05 05 City State Zip Code Amount of Each Disbursement this Period MS Gulfport 39057 Purpose of Disbursement 146.78 Reimburse mileage expense 001 Transaction ID: SB17.4437 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Michael Giere Date of Disbursement Mailing Address 4330 Greenberry Ln 04 2014 City State Zip Code Amount of Each Disbursement this Period VA 22003 Annandale 500.00 Purpose of Disbursement Policy consultant fee 001 Transaction ID: SB17.4369 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Gretchen Hahn Mailing Address 11033 Thrush Ridge Rd 04 2014 19 City State Zip Code Amount of Each Disbursement this Period Reston VA 20191 Purpose of Disbursement 637.50 Fundraising consultant fee 003 Transaction ID : SB17.4421 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary

Other (specify)

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

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

State:

President

District:

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS				FOR LINE NUMBER: PAGE 19 OF 37 (check only one)    X   17
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full) Howie Lind for Congress				
Α.	Full Name (Last, First, Middle Initial)  Gretchen Hahn				Date of Disbursement
	Mailing Address 11033 Thrush Ridge Rd				05 05 2014
	City St Reston V	ate A	Zip Code 20191		Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising consultant fee			003	375.00 Transaction ID : SB17.4438
	Candidate Name			Category/ Type	
		ent For Primary Other (s	General		
В.	Full Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr				Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		ate	Zip Code		
	Ruther Glen V	Ά	22546		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Consultant fee			001	810.00 Transaction ID : SB17.4384
	Candidate Name			Category/ Type	
	President	ent For rimary other (s	General		
_	State: District: Full Name (Last, First, Middle Initial)				
C.	Phillip Hamilton				Date of Disbursement
	Mailing Address 147 Yorktown Dr				04 142014
	City State Ruther Glen VA Purpose of Disbursement		p Code 2546		Amount of Each Disbursement this Period
	Political Consultant fee	001	652.44		
	Candidate Name			Category/ Type	Transaction ID : SB17.4402
		ent For rimary Other (s	General		
	State: District:				
s	SUBTOTAL of Disbursements This Page (optional)				1837.44

	for each category	edule(s) ( of the	FOR LINE NUMBER: PAGE 20 OF 37 (check only one)    X   17
for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions
Phillip Hamilton			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ruther Glen VA  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Senate Disbursement Fo	/ General	001 Category/ Type	Amount of Each Disbursement this Period 691.84  Transaction ID: SB17.4423
Full Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State	Zip Code		Date of Disbursement    M M
Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Disbursement Fo Senate Primary	or: 2014 / General	001 Category/ Type	808.42 Transaction ID : SB17.4440
State: District: Full Name (Last, First, Middle Initial) Mountaintop Media	specify)		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sparta NJ ( Purpose of Disbursement Radio Advertising  Candidate Name  Office Sought: House Disbursement Fo Senate President Other (s	or: 2014 y General	004 Category/ Type	Amount of Each Disbursement this Period  1095.60  Transaction ID: SB17.4403
	for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Howie Lind for Congress  Full Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Ruther Glen VA  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Senate Primary Other (State: District: Full Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Ruther Glen VA  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Primary Other (Senate Primary Other (Senate Primary Other)  Senate Purpose of Disbursement Folitical consultant fee  Candidate Name  Office Sought: House Disbursement Folitical consultant fee  Candidate Name  Office Sought: House Senate Primary Other (Senate Primary Other)  Mailing Address POB 578  City State Zenate NJ  Purpose of Disbursement Radio Advertising  Candidate Name  Office Sought: House Disbursement Folitical Name  Candidate Name  Disbursement Folitical Name  Office Sought: House Disbursement Folitical Name	information copied from such Reports and Statements may not be sold or use for commercial purposes, other than using the name and address of any polit NAME OF COMMITTEE (In Full) Howie Lind for Congress  Full Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Zip Code VA 22546  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Senate President VA 22546  President VA 22546  Purpose of Disbursement For: 2014 Senate President VA 22546  Purpose of Disbursement For: 2014 State: District: Pull Name (Last, First, Middle Initial) Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Zip Code VA 22546  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Senate President VA 22546  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Senate President VA 22546  Purpose of Disbursement For: 2014 Senate President VA 22546  Purpose of Disbursement For: 2014 Senate VA 22546  Purpose of Disbursement For: 2014 Senate VA 22546  Purpose of Disbursement For: 2014 Senate VA 22546  Disbursement For: 2014 Disbursement For	Les separate schedule(s) for each category of the Detailed Summary Page of prevention of the Detailed Summary Page of process. The Detailed Summary Page of process. The Detailed Summary Page of process. The Detailed Summary Page of Disbursement Political Committee Name (Last, First, Middle Initial)  Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Zip Code VA 22546  Purpose of Disbursement Political consultant fee Candidate Name  Office Sought: House Disbursement For: 2014 Senate President State: District:  Full Name (Last, First, Middle Initial)  Phillip Hamilton  Mailing Address 147 Yorktown Dr  City State Zip Code VA 22546  Purpose of Disbursement Political consultant fee Candidate Name

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

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

	SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		-	I I I		FOR LINE NUMBER: (check only one)    X   17
or	for commercial pu NAME OF COMM	urposes, other than using				person for the purpose of soliciting contributions e to solicit contributions from such committee.
A.	Full Name (Last, Mountainton Mailing Address					Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sparta Purpose of Disbu Radio advertising Candidate Name Office Sought:		State NJ  Disbursement For Primary Other (s	General	004 Category/ Type	Amount of Each Disbursement this Period  5684.68  Transaction ID: SB17.4407
В.	Mailing Address  City Sparta  Purpose of Disbu Television advert	POB 578	State NJ	Zip Code 07871	004	Date of Disbursement  M M M / D D / Y Y Y Y Y  Amount of Each Disbursement this Period  6000.00  Transaction ID: SB17.4410
	Office Sought: State:	House Senate President District:	Disbursement For Primary Other (s	General	Category/ Type	
C.	Full Name (Last, Mountainton  Mailing Address					Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sparta Purpose of Disbu TV Advertising Candidate Name Office Sought: State:	House Senate President District:		General	004 Category/ Type	Amount of Each Disbursement this Period 569.04  Transaction ID : SB17.4422

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

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

### ITEMIZED DISBURSEMENTS

Image# 14961643990 **PAGE** 22 37 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Mountaintop Media 2014 Mailing Address POB 578 30 City State Zip Code Amount of Each Disbursement this Period NJ Sparta 07871 Purpose of Disbursement 6180.00 TV & radio advertising 004 Transaction ID: SB17.4449 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) NewsMax Date of Disbursement Mailing Address 560 Village Blvd 04 09 2014 City State Zip Code Amount of Each Disbursement this Period FL 33416 West Palm Beach Purpose of Disbursement 281.10 Online advertising 004 Transaction ID: SB17.4379 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. NewsMax Mailing Address 560 Village Blvd 04 2014 City State Zip Code Amount of Each Disbursement this Period West Palm Beach FL 33416 Purpose of Disbursement 140.55 Online advertising 004 Transaction ID : SB17.4390 Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House

General

Primary

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

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

Other (specify)

State:

Senate

District:

President

### ITEMIZED DISBURSEMENTS

**PAGE** 23 37 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Office Depot 2014 Mailing Address 11816 Spectrum Center 07 City State Zip Code Amount of Each Disbursement this Period VA Reston 20191 Purpose of Disbursement 9.85 Office supplies 001 Transaction ID: SB17.4358 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Office Depot Date of Disbursement Mailing Address 11816 Spectrum Center 04 2014 City State Zip Code Amount of Each Disbursement this Period VA 20191 Reston 19.81 Purpose of Disbursement Office supplies 001 Transaction ID: SB17.4359 Candidate Name Category/ Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Office Depot Mailing Address 11816 Spectrum Center 04 2014 City State Zip Code Amount of Each Disbursement this Period Reston VA 20191 Purpose of Disbursement 31.21 Office supplies 004 Transaction ID : SB17.4360 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) State: District:

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

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

_					FOR LINE NUMBER: PAGE 24 OF 37		
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			1		(check only one)    X   17		
	ny information copied from such Reports and Statem for commercial purposes, other than using the name				person for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) Howie Lind for Congress						
Α.	Full Name (Last, First, Middle Initial)  Office Depot				Date of Disbursement		
	Mailing Address 11816 Spectrum Center				04 09 2014		
	City St Reston VA	ate 4	Zip Code 20191		Amount of Each Disbursement this Period		
	Purpose of Disbursement Office supplies			001	25.35 Transaction ID : SB17.4375		
	Candidate Name			Category/ Type	Transaction ib . 3617.4373		
		rimary					
_	State: District: Full Name (Last, First, Middle Initial)				+		
В.	Office Depot  Mailing Address 11816 Spectrum Center				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City St	Amount of Each Disbursement this Period					
		<b>′</b> A	20191				
	Purpose of Disbursement Office supplies	001			34.36 Transaction ID : SB17.4376		
	Candidate Name			Category/ Type			
	Office Sought:  House Senate President  Disburseme	rimary	r: 2301 General specify)				
	State: District:	`					
C.	Full Name (Last, First, Middle Initial)  Office Depot				Date of Disbursement		
	Mailing Address 11816 Spectrum Center				04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Reston VA	Amount of Each Disbursement this Period					
	Purpose of Disbursement Office supplies			001	23.87		
	Candidate Name			Category/ Type	Transaction ID : SB17.4395		
		rimary					
_	State: District:	•					
					83.58		

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

PAGE 25 OF FOR LINE NUMBER: Use separate schedule(s) (check only one)

TEMIZED DISBURSEMENTS	for each category of th Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and					
NAME OF COMMITTEE (In Full) Howie Lind for Congress					
Full Name (Last, First, Middle Initial)  A. Office Depot  Mailing Address 11816 Spectrum Center			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Ca_	001 tegory/ Type	Amount of Each Disbursement this Period 43.00 Transaction ID : SB17.4397		
State: District:  Full Name (Last, First, Middle Initial)  Craig Orndorff  Mailing Address 467 Toll House Rd  City State  Maurertown VA  Purpose of Disbursement Political Consultant fee  Candidate Name  Office Sought: House Senate President  State: District:	Ca_	001 tegory/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Full Name (Last, First, Middle Initial) Craig Orndorff  Mailing Address 467 Toll House Rd			Date of Disbursement  M M A / D D / Y Y Y Y Y Y A Y A Y A Y A A A A A A A		
Maurertown VA  Purpose of Disbursement Political consultant fee  Candidate Name  Office Sought: House Disbursement Formula Senate Primar	Car	001 tegory/ Type	Amount of Each Disbursement this Period 250.00  Transaction ID : SB17.4406		
SUBTOTAL of Disbursements This Page (optional)					
TOTAL This Period (last page this line number only)					

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	nedule(s) / of the	FOR LINE NUMBER: PAGE 26 OF 37 (check only one)    X   17
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Howie Lind for Congress				
Α.	Full Name (Last, First, Middle Initial)  Craig Orndorff				Date of Disbursement
	Mailing Address 467 Toll House Rd				04 16 2014
	City Maurertown	State VA	Zip Code 22644		Amount of Each Disbursement this Period
	Purpose of Disbursement Political consultant fee		-	001	269.22 Transaction ID : SB17.4413
	Candidate Name			Category/ Type	Transaction ib . 3617.4413
	Office Sought: House Dis Senate President	bursement For Primary Other (s	General	7,6-2	
_	State: District: Full Name (Last, First, Middle Initial)				
В.	Craig Orndorff  Mailing Address 467 Toll House Rd				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		Amount of Each Disbursement this Period
	Maurertown	VA	22644		
	Purpose of Disbursement Political consultant fee			001	331.33 Transaction ID : SB17.4418
	Candidate Name			Category/ Type	
	Office Sought: House Dis Senate President	bursement For Primary Other (s	General		
	State: District:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
C.	Full Name (Last, First, Middle Initial)  Craig Orndorff				Date of Disbursement
	Mailing Address 467 Toll House Rd				05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Maurertown		p Code 22644		Amount of Each Disbursement this Period
	Purpose of Disbursement Political consultant fee			001	379.04
	Candidate Name			Category/ Type	Transaction ID : SB17.4435
	Office Sought: House Dis Senate President	bursement For Primary Other (s	General		
	State: District:	(6			
					979.59

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

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	CHEDULE B (I EMIZED DISBU	-		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 27 OF 37 (check only one)    X   17
						person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTE Howie Lind for	, ,				
Α.	Full Name (Last, First, Cynthia Schmit					Date of Disbursement
	Mailing Address 1940	Taylor Dr #3				04 14 2014
	City Winchester		State VA	Zip Code 22601		Amount of Each Disbursement this Period
	Purpose of Disbursem Political Consultant fe				001	342.48 Transaction ID : SB17.4400
	Candidate Name				Category/ Type	Transaction is 1 05 17.4400
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
		trict:				
В.	Full Name (Last, First, Cynthia Schmir Mailing Address 1940	t				Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		State	Zip Code		
	Winchester		VA	22601		Amount of Each Disbursement this Period
	Purpose of Disbursem Political consultant fe	nent e			001	376.00 Transaction ID : SB17.4405
	Candidate Name				Category/ Type	Trailed vision is 1 52 mm to
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
		trict:				
C.	Full Name (Last, First, Cynthia Schmit	,				Date of Disbursement
	Mailing Address 1940	Taylor Dr #3				04 19 2014
	City Winchester			p Code 2601		Amount of Each Disbursement this Period
	Purpose of Disbursement Political Consultant fee 001			001	419.12	
	Candidate Name				Category/ Type	Transaction ID : SB17.4419
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
	State: Dist	trict:				
						1137.60

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

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

PAGE 28 OF 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page

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Any information copied from such Reports and Statements in						
or for commercial purposes, other than using the name and	audress of any poli	ilicai committe	e to solicit co	DITITIOUTIONS TROM	such commi	uee.
NAME OF COMMITTEE (In Full)						
Howie Lind for Congress						
Full Name (Last, First, Middle Initial)						
A. Cynthia Schmit			Date of	Disbursement		
			M M	/ D D /	Y Y Y Y	′
Mailing Address 1940 Taylor Dr #3			05	02	2014	_
City State	Zip Code		Amount	of Each Disburs	ement this P	eriod
Winchester VA	22601		7 11700111			
Purpose of Disbursement Political consultant fee		001		, ID 0047.413	484.6	64
Candidate Name		Category/	iransactio	on ID : SB17.443	D	
		Type				
Office Sought: House Disbursement For						
Senate Primary						
President Other (s	specify)					
State: District:   Full Name (Last, First, Middle Initial)						
Shane Sutton			Data of	Dishursement		
B. Sharie Sullon				Disbursement		_
Mailing Address 5103 Wills Ln			05	/ D D / 05	2014	Y
City State	Zip Code					
Annandale VA	22003		Amount	of Each Disburs	ement this P	eriod
Purpose of Disbursement	22000				205.0	00
Political consultant fee		001		on ID : SB17.444		
Candidate Name		Category/	1.2.104511		_	
Howie Lind for Congress		Type				
Office Sought: House Disbursement For	-					
Senate Primary						
President Other (s	specify)					
Full Name (Last, First, Middle Initial)						
C. US Postal Service			Date of	Disbursement		
			M M	/ D D /	Y Y Y Y	,
Mailing Address 8409 Lee Hwy			04	07	2014	
•	ip Code 22081		Amount	of Each Disburs	ement this P	eriod
Purpose of Disbursement	.2001				147.0	00
Postage		001	Transaction	on ID : SB17.436		
Candidate Name		Category/ Type	Transactio	. 430 מו וות . עו וות	ı	
Office Sought: House Disbursement For	r: 2014	Турс	$\dashv$			
Senate Primary						
President Other (s						
State: District:						
·					000.0	24
SUBTOTAL of Disbursements This Page (optional)					836.6	04
TOTAL This Period (last page this line number only)						

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

**PAGE** 29 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) Howie Lind for Congress Full Name (Last, First, Middle Initial) Date of Disbursement US Postal Service 2014 Mailing Address 8409 Lee Hwy Zip Code City State Amount of Each Disbursement this Period VA Merrifeld 22081 Purpose of Disbursement 196.00 Postage 001 Transaction ID: SB17.4414 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate General Primary President Other (specify) State: District: 196.00 SUBTOTAL of Disbursements This Page (optional).....

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	dule(s) (double(s) (double(s))	OR LINE NUMBER: PAGE 30 OF 37 check only one)  17
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Howie Lind for Congress	and address of any point		
Full Name (Last, First, Middle Initial)  A. Phyllis Lind  Mailing Address 9513 Veirs Drive Unit #1			Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement
Senate Pri President Ot  State: District:	•	010 Category/ Type	Amount of Each Disbursement this Period 2600.00  Transaction ID: SB20A.4456
Full Name (Last, First, Middle Initial)  Merchant E-Solutions  Mailing Address 3600 Bridge Parkway # 102			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Senate President Ot State: District:	'	001 Category/ Type	Amount of Each Disbursement this Period 48.35  Transaction ID: SB20A.4457
Full Name (Last, First, Middle Initial)  Elizabeth Schafer  Mailing Address PO Box 616	7in Code		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Senate Pri	Zip Code 19958  at For: 2014 Imary General ther (specify)	010 Category/ Type	Amount of Each Disbursement this Period 2600.00  Transaction ID: SB20A.4455
SUBTOTAL of Disbursements This Page (optional)			5248.35

90	CUEDIII E B	/EEC Form	3)		1	FOR LINE NUMBER: PAGE 31 OF 37
		(FEC Form BURSEMEN	-	Use separate sch for each category Detailed Summar	of the	(check only one)  17
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMM Howie Lind	ITTEE (In Full) for Congress				
_	TI D: ()	First, Middle Initial)				Date of Disbursement
A.	Mailing Address 2	·				06 20 2014
	City	- Traionouso ru	State	Zin Codo		
	Harrisonburg		VA	Zip Code 22801		Amount of Each Disbursement this Period
	Purpose of Disbur Printing - event in	sement vitations			001	526.50 Transaction ID : SB20A.4459
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	.,,,,,	
	State:	District:				
В.	Full Name (Last, F	rist, Middle Initial)				Date of Disbursement
	Mailing Address					
	City		State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbur	rsement				
	Candidate Name				Category/ Type	1
	Office Sought:	House Senate	Disbursement For Primary	General		
	State:	President District:	Other (s	pecity)		
	Full Name (Last, F	First, Middle Initial)	l			
C.						Date of Disbursement
	Mailing Address					M M / D D / Y Y Y
	City		State Zi <sub>l</sub>	p Code		Amount of Each Disbursement this Period
Purpose of Disbursement						
	Candidate Name				Category/ Type	1
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
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						526.50

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

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

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4169 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify)  $\blacktriangledown$ 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 75000.00 0.00 75000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> <sup>D</sup>12 ž014 0.00 5/31/2014 % (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 State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 75000.00 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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Detailed Summary Page Transaction ID: SC/10.4171 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify)  $\blacktriangledown$ 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> 06 ž014 0.00 5/31/2014 % (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 State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 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.

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Detailed Summary Page Transaction ID: SC/10.4585 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify) 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> <sup>D</sup> 17 ž014 0.00 5/31/2014 % (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 State ZIP Code Guaranteed City 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4172 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify)  $\blacktriangledown$ 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>25 <sup>M</sup> 03<sup>M</sup> ž014 0.00 5/31/2014 % (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 State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 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/10.4586 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify)  $\blacktriangledown$ 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 11000.00 0.00 11000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 04<sup>M</sup> 08 ž014 0.00 5/31/2014 % (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 State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 11000.00 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.

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Detailed Summary Page Transaction ID: SC/10.4563 NAME OF COMMITTEE (In Full) Howie Lind for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Howard Rhodes Lind** General Mailing Address Other (specify)  $\blacktriangledown$ 1313 Rockland Terrace City State ZIP Code VA 22101 Mclean Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 10300.00 0.00 10300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 <sup>M</sup> 04<sup>M</sup> ž014 0.00 5/31/2014 % (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)..... 10300.00 151300.00 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.