

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
MCGEE FOR CONGRESS

ADDRESS (number and street) C/O C EDWARD MCGEE JR
2850 N ANDRES AVE
 Check if different than previously reported. (ACC) FT LAUDERDALE FL 33311

2. **FEC IDENTIFICATION NUMBER** C C00553388 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
FL 22

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 04 / 01 / 2016 through M M / D D / Y Y Y Y 06 / 30 / 2016

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 Andrea Leigh McGee
Signature of Treasurer Andrea Leigh McGee *[Electronically Filed]* Date M M / D D / Y Y Y Y 08 / 24 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
MCGEE 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))....	10401.03	15251.03
(b) Total Contribution Refunds (from Line 20(d))	0.00	686.90
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10401.03	14564.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12127.60	15139.30
(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)).....	12127.60	15139.30
8. Cash on Hand at Close of Reporting Period (from Line 27).....	438.30	
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).....	1013.47	

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

MCGEE FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

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).....	8522.00	12522.00
(ii) Unitemized	1879.03	2729.03
(iii) TOTAL of contributions from individuals	10401.03	15251.03
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10401.03	15251.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1013.47	2236.79
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1013.47	2236.79
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	11414.50	17487.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12127.60	15139.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	1223.32
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	1223.32
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	686.90
(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	686.90
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	12127.60	17049.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1151.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11414.50
25. SUBTOTAL (add Line 23 and Line 24).....	12565.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12127.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	438.30

**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 40
	<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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Chris Broeman

Mailing Address 6278 N. Red Highway
Pmb 328

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer Self Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2016

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 6287 Bay Club Dr.
#4

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer Business Law Group, P.A. Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
222.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2016

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period
 222.00

Memo Item

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

Mailing Address 2717 NE 35th Dr.

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer McGee Huskey Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

972.00

**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 40
	<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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen Kaiser

Mailing Address 129 NW 13th St.
Suite 33

City Boca Raton State FL Zip Code 33432

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

Name of Employer Fit Food Fresh Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : SA11AI.4283

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 450 Mariner Dr.

City Jupiter State FL Zip Code 33477

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

Name of Employer N/A Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 450 Mariner Dr.

City Jupiter State FL Zip Code 33477

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

Name of Employer N/A Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2016

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 40
	<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)
MCGEE FOR CONGRESS

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

Mailing Address 11989 SE Intera Coastal Terr.

City State Zip Code
Tequesta FL 33469

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

Name of Employer Self Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2016

Transaction ID : SA11AI.4201

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 8211 W. Broward Blvd.
#230

City State Zip Code
Plantation FL 33324

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

Name of Employer Self Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 22 / 2016

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period
1800.00

Memo Item

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

Mailing Address 3365 N. Federal Highway

City State Zip Code
Fort Lauderdale FL 33306

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

Name of Employer Self Occupation Entrepreneur

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 10 / 2016

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

4050.00

**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 40
	<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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Phillip Wardell

Mailing Address 2850 N. Andrews Ave.

City Fort Lauderdale State FL Zip Code 33311

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

Name of Employer Access Insurance Occupation Insurance Exec

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : SA11Al.4267

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Memo Item

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

Memo Item

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

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

1000.00

8522.00

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

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

FOR LINE NUMBER: PAGE 9 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
656.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 01 2016

Transaction ID : SA13A.4302

Amount of Each Receipt this Period
 Memo Item
 Godaddy website
119.88

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
697.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 06 2016

Transaction ID : SA13A.4304

Amount of Each Receipt this Period
 Memo Item
 Minuteman press
40.80

C. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
966.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 07 2016

Transaction ID : SA13A.4324

Amount of Each Receipt this Period
 Memo Item
269.58

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

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

430.26

**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 40
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 07 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4411	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period _____ 25.86	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 992.54		

Full Name (Last, First, Middle Initial) B. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 08 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4406	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period _____ 19.12	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1011.66		

Full Name (Last, First, Middle Initial) C. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 08 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4407	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period _____ 17.70	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1029.36		

SUBTOTAL of Receipts This Page (optional).....	_____ 62.68
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 11 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1052.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2016

Transaction ID : SA13A.4409

Amount of Each Receipt this Period
 23.10

Memo Item

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1071.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2016

Transaction ID : SA13A.4410

Amount of Each Receipt this Period
 18.84

Memo Item

C. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1090.99

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2016

Transaction ID : SA13A.4408

Amount of Each Receipt this Period
 19.69

Memo Item

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

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

61.63

**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 40
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4300	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period 72.41	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1163.40		
		<input type="checkbox"/> Memo Item Office Depot April 13th	

Full Name (Last, First, Middle Initial) B. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4297	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period 27.96	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1191.36		
		<input type="checkbox"/> Memo Item Staples April 15th	

Full Name (Last, First, Middle Initial) C. Andrea Leigh McGee		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2016	
Mailing Address 961 NE 27TH AVENUE		Transaction ID : SA13A.4296	
City POMPANO BEACH	State FL	Zip Code 33062	
FEC ID number of contributing federal political committee. C H4FL22086		Amount of Each Receipt this Period 13.69	
Name of Employer Finn Real Estate	Occupation Real Estate Agent		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1205.05		
		<input type="checkbox"/> Memo Item Staples April 26	

SUBTOTAL of Receipts This Page (optional).....	114.06
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 40
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1252.53

Date of Receipt: 05 / 01 / 2016

Transaction ID : SA13A.4295

Amount of Each Receipt this Period: 47.48

Memo Item
May 1 Office De|pt

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1257.53

Date of Receipt: 05 / 09 / 2016

Transaction ID : SA13A.4301

Amount of Each Receipt this Period: 5.00

Memo Item
2014 Precinct

C. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1262.53

Date of Receipt: 05 / 09 / 2016

Transaction ID : SA13A.4330

Amount of Each Receipt this Period: 5.00

Memo Item

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

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

57.48

**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 40
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1271.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA13A.4298

Amount of Each Receipt this Period
8.48

Memo Item
 Parking Fee

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1318.01

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA13A.4337

Amount of Each Receipt this Period
47.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1338.64

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Transaction ID : SA13A.4299

Amount of Each Receipt this Period
20.63

Memo Item
 Publix

SUBTOTAL of Receipts This Page (optional).....	76.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1415.49

Date of Receipt: 06 / 03 / 2016

Transaction ID : SA13A.4328

Amount of Each Receipt this Period: 76.85

Memo Item

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1417.61

Date of Receipt: 06 / 03 / 2016

Transaction ID : SA13A.4331

Amount of Each Receipt this Period: 2.12

Memo Item

C. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City: POMPANO BEACH State: FL Zip Code: 33062

FEC ID number of contributing federal political committee: **C H4FL22086**

Name of Employer: Finn Real Estate Occupation: Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1457.61

Date of Receipt: 06 / 12 / 2016

Transaction ID : SA13A.4326

Amount of Each Receipt this Period: 40.00

Memo Item

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

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

118.97

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

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

FOR LINE NUMBER: PAGE 16 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCGEE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1510.14

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 12 2016

Transaction ID : SA13A.4336

Amount of Each Receipt this Period
52.53

Memo Item

B. Full Name (Last, First, Middle Initial)
Andrea Leigh McGee

Mailing Address 961 NE 27TH AVENUE

City State Zip Code
POMPANO BEACH FL 33062

FEC ID number of contributing federal political committee. **C H4FL22086**

Name of Employer Occupation
Finn Real Estate Real Estate Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1549.89

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 22 2016

Transaction ID : SA13A.4339

Amount of Each Receipt this Period
39.75

Memo Item

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

Memo Item

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

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

92.28

1013.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 40	
	<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)
MCGEE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sectary of State		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address R.A. Gary Building 500 S. Bronough St.		Amount of Each Disbursement this Period 10440.00 <input type="checkbox"/> Memo Item
City Tallahassee	State FL Zip Code 32399	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.4351
Candidate Name MCGEE FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22		

Full Name (Last, First, Middle Initial) B. Trademark Graphic		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016
Mailing Address 2030 NW 93rd Ave		Amount of Each Disbursement this Period 367.82 <input type="checkbox"/> Memo Item
City Pembroke Pines	State FL Zip Code 33024	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.4353
Candidate Name MCGEE FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22		

Full Name (Last, First, Middle Initial) c. Tropicana Resort and Casino		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 3801 Las Vega Blvd. South		Amount of Each Disbursement this Period 269.58 <input type="checkbox"/> Memo Item
City Las Vegas	State NV Zip Code 89109	
Purpose of Disbursement	Category/Type 002	Transaction ID : SB17.4341
Candidate Name MCGEE FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22		

SUBTOTAL of Disbursements This Page (optional).....	11077.40
TOTAL This Period (last page this line number only).....	11077.40

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4302**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27TH AVENUE		

City	State	ZIP Code
POMPANO BEACH	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
119.88	0.00	119.88

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 01 / Y 2016	M M / D D / Y 12/31/16	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).....	119.88
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) **Transaction ID : SC/10.4304**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40.80	0.00	40.80

TERMS Date Incurred Date Due Interest Rate Secured:
 04 / 06 / 2016 M M / D D / 12/31/16 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)..... ▶ 40.80
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) **Transaction ID : SC/10.4324**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address General
 961 NE 27TH AVENUE Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
269.58	0.00	269.58

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 07 / 2016	12/31/16	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).....	▶	269.58
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) **Transaction ID : SC/10.4411**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25.86	0.00	25.86

TERMS Date Incurred Date Due Interest Rate Secured:
 04 / 07 / 2016 M M / D D / 12/31/16 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)..... ▶ 25.86
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) **Transaction ID : SC/10.4406**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPAN BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
19.12	0.00	19.12

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 08 / 2016	12/31/16	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)..... ▶ 19.12
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) **Transaction ID : SC/10.4407**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
17.70	0.00	17.70

TERMS Date Incurred Date Due Interest Rate Secured:
 04 / 08 / 2016 M M / D D / 12/31/16 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)..... ▶ 17.70
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) **Transaction ID : SC/10.4409**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
23.10	0.00	23.10

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 09 / Y 2016	M M / D D / Y 12/31/16	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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	23.10
TOTALS This Period (last page in this line only).....	<input 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4410**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
18.84	0.00	18.84

TERMS Date Incurred Date Due Interest Rate Secured:
 04 / 09 / 2016 M M / D D / 12/31/16 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)..... ▶ 18.84
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)

Transaction ID : SC/10.4408

MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Andrea Leigh McGee

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

961 NE 27TH AVENUE

City

State

ZIP Code

POMPANO BEACH

FL

33062

Original Amount of Loan

19.69

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19.69

TERMS

Date Incurred

04 / 10 / 2016

Date Due

12/31/16

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)..... ▶

19.69

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)

Transaction ID : SC/10.4300

MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2016

Andrea Leigh McGee

Primary

General

Other (specify) ▼

Mailing Address

961 NE 27TH AVENUE

City

State

ZIP Code

POMPANO BEACH

FL

33062

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

72.41

0.00

72.41

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

04

13

2016

12/31/16

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)..... ▶

72.41

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) **Transaction ID : SC/10.4297**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPAÑO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
27.96	0.00	27.96

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 15 / 2016	12/31/16	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).....	▶	27.96
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) **Transaction ID : SC/10.4296**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address General
 961 NE 27TH AVENUE Other (specify) ▼

City State ZIP Code
 POMPAÑO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13.69	0.00	13.69

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 26 / 2016	12/31/16	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).....	▶	13.69
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**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4295**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27TH AVENUE		

City	State	ZIP Code
POMPANO BEACH	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
47.48	0.00	47.48

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 01 / Y 2016	M M / D D / Y 12/31/16	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: <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="47.48"/>
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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4301**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27TH AVENUE		

City	State	ZIP Code
POMPANO BEACH	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5.00	0.00	5.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 09 / 2016	12/31/16	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).....	5.00
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) **Transaction ID : SC/10.4330**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 961 NE 27TH AVENUE		

City	State	ZIP Code
POMPANO BEACH	FL	33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5.00	0.00	5.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 05 / 09 / 2016	M M / D D / Y Y Y Y 12/31/16	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).....	5.00
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) **Transaction ID : SC/10.4298**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
POMPANO BEACH FL 33062

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
8.48 0.00 8.48

TERMS Date Incurred Date Due Interest Rate Secured:
M 05 / D 18 / Y 2016 M M / D D / Y 12/31/16 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)..... ▶ 8.48
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)

Transaction ID : SC/10.4337

MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2016

Andrea Leigh McGee

Primary

General

Other (specify) ▼

Mailing Address

961 NE 27TH AVENUE

City

State

ZIP Code

POMPANO BEACH

FL

33062

Original Amount of Loan

47.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

47.00

TERMS

Date Incurred

M 05 / D 18 / Y 2016

Date Due

M M / D D / Y 12/31/16 Y

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)..... ▶

47.00

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) **Transaction ID : SC/10.4299**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
POMPANO BEACH FL 33062

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20.63 0.00 20.63

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
06 03 / 2016 12/31/16

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)..... ▶ 20.63
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) **Transaction ID : SC/10.4328**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPAÑO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
76.85	0.00	76.85

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
 06 / 03 / 2016 / 12/31/16

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

SUBTOTALS This Period This Page (optional).....	76.85
TOTALS This Period (last page in this line only).....	<input 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4331**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2.12	0.00	2.12

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 03 / Y 2016	M M / D D / Y 12/31/16	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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	2.12
TOTALS This Period (last page in this line only).....	<input 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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4326**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address General
 961 NE 27TH AVENUE Other (specify) ▼

City State ZIP Code
 POMPANO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40.00	0.00	40.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 12 / 2016	12/31/16	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).....	▶	40.00
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) **Transaction ID : SC/10.4336**
MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
Andrea Leigh McGee Primary
 Mailing Address 961 NE 27TH AVENUE General
 Other (specify) ▼

City State ZIP Code
 POMPAÑO BEACH FL 33062

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
52.53	0.00	52.53

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 12 / 2016	12/31/16	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).....	▶	52.53
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)

Transaction ID : SC/10.4339

MCGEE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Memo Item

Election: 2016

Andrea Leigh McGee

Primary

General

Other (specify) ▼

Mailing Address

961 NE 27TH AVENUE

City

State

ZIP Code

POMPANO BEACH

FL

33062

Original Amount of Loan

39.75

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

39.75

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

22

2016

12/31/16

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)..... ▶

39.75

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

1013.47

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