PAGE 1 / 40

REPORT OF RECEIPTS

FORM 3	Δ	For An		RSEN zed Com		TS ——			Office Us	se Only	
1. NAME OF COMMITTEE (in		TYPE OR PRIN	T ▼		ample: If er the line	typing, types.	ре	12FE4M5	5		
MCGEE FOR	CONGR	ESS									
ADDRESS (number ar	nd street)	C/O C EDWAI		E JR							
Check if did than previous reported. (A	usly	FT LAUDERE						FL	33311		
2. FEC IDENTIFIC	CATION NU	JMBER ▼		CITY			S	STATE A		ZIP CODE	IOTOLOT
C C0055338	88			S THIS REPORT		NEW (N) O I	R	× AMENI (A)	DED	STATE ▼ D	22
X July 15 Octobe January	eports: 5 Quarterly F 6 Quarterly R 9 15 Quarter	deport (Q1) eport (Q2) ly Report (Q3) d Report (YE)	E (c) 30	election on	Primary	(12P) ion (12C) Report f	D /	General (1	128)	in the State of	f (12R)
5. Covering Period		M / 01	Y Y 20	16 Y	throu	ıgh	M M M 06	/ D D /	Y Y 20	16	
I certify that I have a Type or Print Name		•		at of my kn	owledge	and belief	f it is tru	ie, correct an	d comple	ete.	
Signature of Treasure		Andrea Leigr	i wicgee		[Electronia	cally Filed]	_ Da	ate 08	/ D	.4 Y Y Y 20)16 Y
NOTE: Submission of	false, errone	eous, or incompl	ete inform	nation may	subject th	e person s	signing th	nis Report to t	he penalt	ties of 2 U.S.C	. §437g.
Office Use Only										C FORM 3	³

SUMMARY PAGE

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

PAGE 2 / 40

Write or Type Committee Name

MCGEE FOR CONGRESS

04 06 30 2016 01 2016 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 10401.03 15251.03 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 686.90 (from Line 20(d)) (c) Net Contributions (other than loans) 10401.03 14564.13 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 12127.60 15139.30 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 12127.60 15139.30 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 438.30 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 1013.47 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

PAGE 3 / 40

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MCGEE FOR CONGRESS

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date			
1.	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 (e) TOTAL CONTRIBUTIONS	0.00	0.00			
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	10401.03	15251.03			
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00			
3.	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			
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00			
6.	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

FEC Form 3 (Revised 02/2003)

PAGE 4 / 40

	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) D-1::	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees		7 7 7 7
	(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 SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING 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 (fro	om Line 22)	12127.60
7	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	438.30

Other (specify)

Full Name (Last, First, Middle Initial)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

40 FOR LINE NUMBER: **PAGE** 5 OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 11d Detailed Summary Page 12 13a 14

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) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Chris Broeman Date of Receipt Mailing Address 6278 N. Red Highway 06 20 2016 Pmb 328 City State Zip Code Transaction ID: SA11AI.4224 FL 33308 Fort Lauderdale FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation N/A Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Michael Casanover Date of Receipt Mailing Address 6287 Bay Club Dr. 06 17 2016 Citv State Zip Code Transaction ID: SA11AI.4228 Fort Lauderdale FL 33308 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 222.00 Name of Employer Occupation Business Law Group, P.A. Attorney Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General

David Huskey		Date of Receipt
Mailing Address 2717 NE 35th Dr.		04 04 2016
City	State Zip Code	Transaction ID : SA11AI.4197
Fort Lauderda;e	FL 33308	Transaction is . OATTAIL-107
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	500.00
McGee Huskey	Attorney	Memo Item
Receipt For: 2016	Election Cycle-to-Date	
Primary General Other (specify)	500.00	

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

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

222.00

972.00

PAGE 6 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 11d 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

	ng the name and address of any political committee	
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		
Full Name (Last, First, Middle Initial) Stephen Kaiser Mailing Address 129 NW 13th St. Suite 33		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4283
Boca Raton	FL 33432	_
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Fit Food Fresh	Occupation CEO	Memo Item
Receipt For: 2016 Primary S General Other (specify)	Election Cycle-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ruby Mate		Date of Receipt
Mailing Address 450 Mariner Dr.		05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jupiter	State Zip Code FL 33477	Transaction ID : SA11AI.4207
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	500.00
N/A Pagaint For: 2016	N/A	Memo Item
Receipt For: 2016 Primary General Other (specify)	Election Cycle-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ruby Mate		Date of Receipt
Mailing Address 450 Mariner Dr.		06 17 2016
City Jupiter	State Zip Code FL 33477	Transaction ID : SA11AI.4210
FEC ID number of contributing federal political committee.	C 33477	Amount of Each Receipt this Period
Name of Employer	Occupation	1500.00
N/A Receipt For: 2016	N/A Election Cycle-to-Date	Memo Item
Primary General Other (specify)	2000.00	
SUBTOTAL of Receipts This Page (option	al)	2500.00
CONTRACT TO THE PROPERTY OF TH	<u>~,</u>	
TOTAL This Period (last page this line nur	nber only)	

Full Name (Last, First, Middle Initial)

C.

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

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PAGE 7 OF 40

(check only one)

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114

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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) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Jorj M Morgan Date of Receipt Mailing Address 11989 SE Intera Coastal Terr. 2016 09 City State Zip Code Transaction ID: SA11AI.4201 FL 33469 Tequesta FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation N/A Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Kyle Mowitz Date of Receipt Mailing Address 8211 W. Broward Blvd. 06 22 2016 #230 City State Zip Code Transaction ID: SA11AI.4226 **Plantation** FL 33324 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1800.00 Name of Employer Occupation N/A Self Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 1800.00 Other (specify)

Michael J Peter		Date of Receipt
Mailing Address 3365 N. Federal Highway		06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fort Lauderdale	State Zip Code FL 33306	Transaction ID : SA11AI.4235
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	2000.00
Self	Entrepreneaur	Memo Item
Receipt For: 2016	Election Cycle-to-Date	
Primary General Other (specify)	2000.00	

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

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

4050.00

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

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	12		13a	13b		14		15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Phillip Wardell Date of Receipt Mailing Address 2850 N. Andrews Ave. 06 2016 01 City State Zip Code Transaction ID: SA11AI.4267 FL 33311 Fort Lauderda;e FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Access Insurance Insurance Exec Memo Item Receipt For: 2016 Election Cycle-to-Date X General Primary 1000.00 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 Memo Item 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 С Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 8522.00 TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS			person for the purpose of soliciting contributions see to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Finn Real Estate Receipt For: 2016 Primary General Other (specify)	Occupation Real Estate		Date of Receipt M M M / D D / 2016 Transaction ID: SA13A.4302 Amount of Each Receipt this Period 119.88 Memo Item Godaddy website
Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Finn Real Estate Receipt For: 2016 Primary Other (specify) Full Name (Last, First, Middle Initial)	Occupation Real Estate		Date of Receipt M 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) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE			Date of Receipt

Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE 07 2016 04 City State Zip Code Transaction ID: SA13A.4324 POMPANO BEACH FL 33062 FEC ID number of contributing C H4FL22086 Amount of Each Receipt this Period federal political committee. 269.58 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Receipt For: 2016 Election Cycle-to-Date Primary General 966.68 Other (specify)

430.26

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NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Finn Real Estate Real Estate Agent Date of Receipt M M O7 2016 Transaction ID: SA13A.4411 Amount of Each Receipt this Period 25.86		Statements may not be sold or used by any pe e name and address of any political committee	
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. Name of Employer Finn Real Estate Real Estate Agent Date of Receipt M M O7 2016 Transaction ID: SA13A.4411 Amount of Each Receipt this Period			
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MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) A. Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Finn Real Estate Receipt For: 2016 Primary Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FULL Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Coccupation Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Coccupation Amount of Each Receipt this Ferral Amount of Each	16
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POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Finn Real Estate Receipt For: 2016 Primary Other (specify) Pull Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Cupation Real Estate Agent Election Cycle-to-Date Date of Receipt Memo Item Date of Receipt Transaction ID: SA13A.4419 Amount of Each Receipt this Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Occupation	eriod
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Finn Real Estate Receipt For: 2016 Primary Signary Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Real Estate Agent Election Cycle-to-Date Election Cycle-to-Date Date of Receipt Transaction ID: SA13A.4410 Amount of Each Receipt this Ferromann and the political committee. Occupation	23.10
Receipt For: 2016 Primary X General Other (specify) B. Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Election Cycle-to-Date Lost Cycle-to-Date Election Cycle-to-Date Election Cycle-to-Date Lost Cycle-to-Date Election Cycle-to-Date Election Cycle-to-Date Lost Cycle-to-Date Election Cycle-to-Date Lost Cycle-to-Date Date of Receipt MM / D9 / YYY O4 / 09 / 20 Transaction ID: SA13A.4410 Amount of Each Receipt this Ferrica Cycle Cycle Transaction ID: SA13A.4410	23.10
Primary General Other (specify) B. Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer General 1052.46 Date of Receipt M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Other (specify) Date of Receipt Mailing Address 961 NE 27TH AVENUE Transaction ID: SA13A.4410 Amount of Each Receipt this Federal Political Committee.	
B. Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Date of Receipt Transaction ID: SA13A.4410 Amount of Each Receipt this F	
Mailing Address 961 NE 27TH AVENUE City POMPANO BEACH FEC ID number of contributing federal political committee. Name of Employer Mailing Address 961 NE 27TH AVENUE State Zip Code FL 33062 Transaction ID: SA13A.4410 Amount of Each Receipt this F	
City State Zip Code POMPANO BEACH FL 33062 FEC ID number of contributing federal political committee. C H4FL22086 Name of Employer Occupation Transaction ID : SA13A.4410 Amount of Each Receipt this F	16
FEC ID number of contributing federal political committee. C H4FL22086 Amount of Each Receipt this F	
federal political committee. Name of Employer Occupation Amount of Each Receipt this F	
Finn Pool Estato Pool Estato Agent Mana Hom	18.84
Receipt For: 2016 Election Cycle-to-Date	
Primary General Other (specify) 1071.30	
Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt	
	16
City State Zip Code Transaction ID : SA13A.4408	
POMPANO BEACH FL 33062	
FEC ID number of contributing federal political committee. C H4FL22086 Amount of Each Receipt this F	
Name of Employer Occupation	eriod
Finn Real Estate Real Estate Agent Memo Item	eriod 19.69
Receipt For: 2016 Election Cycle-to-Date	
Primary General Other (specify) 1090.99	
SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A	(FEC Form	3)
ITEMIZED REC	CEIPTS	

FOR LINE NUMBER: PAGE 12 OF 40 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12

X 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) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 2016 13 City State Zip Code Transaction ID: SA13A.4300 FL 33062 POMPANO BEACH FEC ID number of contributing Amount of Each Receipt this Period H4FL22086 federal political committee. 72.41 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Office Depot April 13th Receipt For: 2016 Election Cycle-to-Date X General Primary 1163.40 Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 15 2016 Citv State Zip Code Transaction ID: SA13A.4297 POMPANO BEACH FL 33062 FEC ID number of contributing Amount of Each Receipt this Period С H4FL22086 federal political committee. 27.96 Name of Employer Occupation Memo Item Finn Real Estate Real Estate Agent Staples April 15th Receipt For: 2016 Election Cycle-to-Date | Primary General 1191.36 Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 2016 26 City State Zip Code Transaction ID: SA13A.4296 FL POMPANO BEACH 33062 FEC ID number of contributing С H4FL22086 Amount of Each Receipt this Period federal political committee. 13.69 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Receipt For: 2016 Staples April 26 Election Cycle-to-Date | Primary General Other (specify) 1205.05 114.06 SUBTOTAL of Receipts This Page (optional).....

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

	FOR LINE NUMBER:				PAGE	13 OF	40	
Use separate schedule(s)	(ch	neck only	or or	ne)				
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	NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS										
<u> </u>	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt				
,	Mailing Address 961 NE 27TH AVENUE					05			2016		
	POMPANO BEACH	State FL	Zip Cod 33062	e		Transac	ction ID : SA	13A.4295			
	FEC ID number of contributing federal political committee.	С н4	FL22086			Amoui	nt of Each I	Receipt this			
	Name of Employer Finn Real Estate	Occupation Real Estate					emo Item		47.48	3	
	Receipt For: 2016 Primary General Other (specify)	Election C	ycle-to-Date	1252.53		May 1	Office De[pt				
В.	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt				
٥.	Mailing Address 961 NE 27TH AVENUE					05			2016		
	POMPANO BEACH	State Zip Code FL 33062				Transaction ID : SA13A.4301					
	FEC ID number of contributing federal political committee.	C H4FL22086					Amount of Each Receipt this Period				
	Name of Employer Finn Real Estate	Occupation Real Estate				Me	emo Item		5.00)	
	Receipt For: 2016 Primary General Other (specify)	Election C	ycle-to-Date	1257.53		2014 Pi	recinct				
_	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt				
C.	Mailing Address 961 NE 27TH AVENUE					05			2016		
	POMPANO BEACH	State FL	Zip Cod 33062	e		Transac	ction ID : SA	A13A.4330			
	FEC ID number of contributing federal political committee.	С н4	FL22086			Amou	nt of Each	Receipt this	Period	_	
	Name of Employer Finn Real Estate	Occupation Real Estate							5.00	0	
	Receipt For: 2016 Primary General		ycle-to-Date			∐ M€	emo Item				
	Other (specify)	L		1262.53							
Г	SUBTOTAL of Receipts This Page (optional)				_	Ë			57.4	8	
T	'OTAL This Period (last page this line number of	only)			. [-	-			

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	NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS											
<u> </u>	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt					
	Mailing Address 961 NE 27TH AVENUE					05			2016			
	POMPANO BEACH	State FL	Zip Code 33062	e	1	Transac	tion ID : SA	13A.4298				
	FEC ID number of contributing federal political committee.	С н4	FL22086			Amour	nt of Each F	Receipt this				
	Name of Employer Finn Real Estate	Occupation Real Estate					emo Item		8.48	3		
	Receipt For: 2016 Primary General Other (specify)	Election C	ycle-to-Date	1271.01		Parking	j Fee					
В.	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt					
υ.	Mailing Address 961 NE 27TH AVENUE					05	/ D 18		2016			
	POMPANO BEACH	State Zip Code FL 33062					Transaction ID : SA13A.4337					
	FEC ID number of contributing federal political committee.	C H4	FL22086			Amou	nt of Each I	Receipt this				
	Name of Employer Finn Real Estate	Occupation Real Estate				Me	emo Item	9	47.00	,		
	Receipt For: 2016 Primary General Other (specify)	Election C	ycle-to-Date	1318.01								
_	Full Name (Last, First, Middle Initial) Andrea Leigh McGee					Date of	of Receipt					
C.	Mailing Address 961 NE 27TH AVENUE	<u> </u>	7: 0			M 06	/ 03		2016			
	POMPANO BEACH	State FL	Zip Code 33062	e		Transac	ction ID : SA	A13A.4299				
	FEC ID number of contributing federal political committee.	С н4	FL22086			Amou	nt of Each I	Receipt this	Period	_		
	Name of Employer Finn Real Estate	Occupation Real Estate				Ļ.			20.63	3		
	Receipt For: 2016 Primary General		ycle-to-Date	4000.04	7	Publix	emo Item					
_	Other (specify)		-	1338.64								
s	SUBTOTAL of Receipts This Page (optional)				_	Ë			76.1	1		
Т	OTAL This Period (last page this line number of	only)				L.	. ,					

	FOR LINE NUMBER: PAGE 15 OF 40
Use separate schedule(s)	(check only one)
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Detailed Summary Page	12 X 13a 13b 14 15
	person for the purpose of soliciting contributions e to solicit contributions from such committee.

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 06 2016 03 City State Zip Code Transaction ID: SA13A.4328 FL 33062 POMPANO BEACH FEC ID number of contributing Amount of Each Receipt this Period H4FL22086 federal political committee. 76.85 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 1415.49 Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 06 03 2016 Citv State Zip Code Transaction ID: SA13A.4331 POMPANO BEACH FL 33062 FEC ID number of contributing C H4FL22086 Amount of Each Receipt this Period federal political committee. 2.12 Name of Employer Occupation Real Estate Agent Finn Real Estate Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 1417.61 Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 2016 12 City State Zip Code Transaction ID: SA13A.4326 POMPANO BEACH FL 33062 FEC ID number of contributing С H4FL22086 Amount of Each Receipt this Period federal political committee. 40.00 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Receipt For: 2016 Election Cycle-to-Date Y Primary General Other (specify) 1457.61 118.97 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the	(ch	eck only	or	ne)	ı				
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Detailed Summary Page		12	×	13a	13b		14	15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 06 2016 12 City State Zip Code Transaction ID: SA13A.4336 FL 33062 POMPANO BEACH FEC ID number of contributing Amount of Each Receipt this Period H4FL22086 federal political committee. 52.53 Name of Employer Occupation Finn Real Estate Real Estate Agent Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 1510.14 Other (specify) Full Name (Last, First, Middle Initial) Andrea Leigh McGee Date of Receipt Mailing Address 961 NE 27TH AVENUE 06 22 2016 City State Zip Code Transaction ID: SA13A.4339 POMPANO BEACH FL 33062 FEC ID number of contributing Amount of Each Receipt this Period С H4FL22086 federal political committee. 39.75 Name of Employer Occupation Real Estate Agent Finn Real Estate Memo Item Receipt For: 2016 Election Cycle-to-Date | Primary General 1549.89 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 Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 92.28 SUBTOTAL of Receipts This Page (optional)..... 1013.47 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sched for each category o Detailed Summary F	f the (c	OR LINE NUMBER: PAGE 17 OF 40 check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Sectary of State			Date of Disbursement
Mailing Address R.A. Gary Building 500 S. Bronough St.			06 22 2016
City State Tallahassee FL Purpose of Disbursement	Zip Code 32399	001	Amount of Each Disbursement this Period
Candidate Name MCGEE FOR CONGRESS Office Sought: House Disbursement F	or: 2016	Category/ Type	Memo Item Transaction ID : SB17.4351
Senate President Other State: FL District: 22	ry General (specify)		
Full Name (Last, First, Middle Initial) Trademark Graphic Mailing Address 2030 NW 93rd Ave			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 Pembroke Pines FL	Zip Code 33024		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name MCGEE FOR CONGRESS	[001 Category/	Memo Item
Office Sought: House Disbursement F Senate Primar		Туре	Transaction ID : SB17.4353
Full Name (Last, First, Middle Initial) Tropicana Resort and Casino			Date of Disbursement
Mailing Address 3801 Las Vega Blvd. South			04
City State Las Vegas NV Purpose of Disbursement Candidate Name	Zip Code 89109	002	Amount of Each Disbursement this Period 269.58 Memo Item
MCGEE FOR CONGRESS Office Sought: House Senate Disbursement F		Category/ Type	Transaction ID : SB17.4341

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

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

11077.40

11077.40

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

PAGE 18

NUMBER: one) X 13a 13b

LOANS	Detailed Summary Page (Crieck only one) 13a 13b
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4302
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	☐ Memo Item Election: 2016 ☐ Primary ☐ General
Mailing Address 961 NE 27TH AVENUE	General Other (specify) ▼
City State ZIP Co POMPANO BEACH FL 33062	ide
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period 0.00 119.88
TERMS Date Incurred Date Due M 04	Interest Rate Secured: 12/31/16 0.00 % (apr) Yes No
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation Amount
City State ZIP Code	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

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

FOR LINE NUMBER: (check only one)

PAGE 19

NUMBER: y one) X 13a 13b

LUANS	Detailed Summary Page (Crieck Only One) 13a
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4304
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼
City State ZIP Compand BEACH FL 33062	
Original Amount of Loan Cumulative Payment To 40.80	Date Balance Outstanding at Close of This Period 0.00 40.80
TERMS Date Incurred Date Due M 04 / D 06 / Y 2016 Y	e Interest Rate Secured: 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	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	f no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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	13b

DANS		for each category of Detailed Summary	
AME OF COMMITTEE (In Fu	•	Tran	saction ID : SC/10.4324
	ne (Last, First, Middle Initial)	Memo Item	Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE			Other (specify)
City POMPANO BEACH	State FL	ZIP Code 33062	
Original Amount of Loan	Cumulative	Payment To Date E	Balance Outstanding at Close of This Period
	269.58	0.00	269.58
Date Incurred Mo4 / D07 / N	ed	Date Due Interest F	Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Gua 1. Full Name (Last, First,	rantors (if any) to Loan Sou	rce Name of Employer	
, , ,	whate minary		
Mailing Address		Occupation Amount	
City	State ZIP Code		, , , , , , , , ,
2. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,
4. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This	s Page (optional)		269.58
FOTALS This Period (last page	ge in this line only)	·····	, ,
Carry outstanding balance o	nly to LINE 3, Schedule D, for	this line. If no Schedule D, carry f	forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of to Detailed Summary Page	
IAME OF COMMITTEE (In FU		Transac	ction ID : SC/10.4411
	ne (Last, First, Middle Initial)	Memo Item	Election: 2016 Primary
Mailing Address 961 NE 27TH AVENUE			X General Other (specify) ▼
City POMPANO BEACH		P Code 3062	
Original Amount of Loan	Cumulative Payme		ance Outstanding at Close of This Period
TEDMO	25.86	0.00	25.86
Date Incurr	ed Date / 2016 Y M M / D D /	Due Interest Rate	
List All Endorsers or Guant. 1. Full Name (Last, First,	arantors (if any) to Loan Source	Name of Employer	
•	Wildie Hillaly		
Mailing Address		Occupation Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
GUBTOTALS This Period Thi	s Page (optional)	<u> </u>	25.86
FOTALS This Period (last pa	ge in this line only)	······	
Carry outstanding balance o	nly to LINE 3, Schedule D, for this lin	e. If no Schedule D, carry forv	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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LOANS	Detailed Summary Page (check only one)			
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4406			
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General			
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼			
City State ZIP Co POMPANO BEACH FL 33062	de			
Original Amount of Loan Cumulative Payment To 19.12	Date Balance Outstanding at Close of This Period 0.00 19.12			
Date Incurred Date Due	Interest Rate Secured: 12/31/16 0.00 (apr) Yes No			
List All Endorsers or Guarantors (if any) to Loan Source				
Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation Amount			
City State ZIP Code	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)				
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/10.4407 NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Andrea Leigh McGee ★ General Mailing Address Other (specify) 961 NE 27TH AVENUE State ZIP Code City FL 33062 POMPANO BEACH Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 17.70 0.00 17.70 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 ^M 04^M 08 2016 12/31/16 % (apr) 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 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)..... 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

OANS		Detailed Summary Page	
AME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transac	ction ID : SC/10.4409
LOAN SOURCE Full Name (Last, Find Andrea Leigh McGee	rst, Middle Initial)	Memo Item	Election: 2016 Primary X General
Mailing Address 961 NE 27TH AVENUE			Other (specify)
City	State ZIP	Code	
POMPANO BEACH	FL 3306	52	
Original Amount of Loan	Cumulative Payment	To Date Bala	ance Outstanding at Close of This Period
TERMS Date Incurred M04 D09 Does / Y 2016	Date Du	ue Interest Rate Y 12/31/16 Y 0.	
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	7 7
2. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	9
SUBTOTALS This Period This Page (op			23.10
TOTALS This Period (last page in this li Carry outstanding balance only to LINE			ward to appropriate line of Summer:
Jan , Judgianumy Dalamoe Umy to Line	o, concade D, for this life.	Jonedule D, Carry 1011	mana to appropriate line of Juli lindly.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

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LUANS	Detailed Summary Page (Crieck only one) 13a
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4410
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	☐ Memo Item Election: 2016 ☐ Primary ☐ General
Mailing Address 961 NE 27TH AVENUE	General Other (specify) ▼
City State ZIP Co POMPANO BEACH FL 33062	ode
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period 0.00 18.84
	Interest Rate Secured: 12/31/16 O.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 Amount
City State ZIP Code	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.

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			Detailed Summary		(check only one)	×	13a 13b
AME OF COMMITTEE (In Full)	20		Trar	saction	ID : SC/10.4408		
MCGEE FOR CONGRES	55						
LOAN SOURCE Full Name (La Andrea Leigh McGee	ast, First, Middle	e Initial)	Memo Item		ction: 2016 Primary General		
Mailing Address 961 NE 27TH AVENUE					Other (specify)		
City	St	ate ZIP Cod	de				
POMPANO BEACH		FL 33062					
Original Amount of Loan	(Cumulative Payment To	Date	Balance (Outstanding at Clos	se of This	s Period
	19.69		0.00			19.6	9
Date Incurred MO4 / DO / Y 20	16 Y	Date Due	Interest 2/31/16	Rate 0.00	7 .	Secured:	\boxtimes
				-	% (apr)	Yes	No
List All Endorsers or Guaranto 1. Full Name (Last, First, Midd	, ,,	oan Source	Name of Employer				
T. Tail Name (East, First, Wilde	iio iiiilaij						
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle	e Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle	e Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle	e Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:		7	-	
SUBTOTALS This Period This Pag	ge (optional)		·····		7	19.69	9
TOTALS This Period (last page in	this line only)		·····		7 7		
Carry outstanding balance only to	LINE 3. Sched	ule D. for this line. If I	no Schedule D. carry	forward	to appropriate line	of Sum	marv.

Use separate schedule(s)

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DANS			for each category Detailed Summar		(check only one	e) X 13a
AME OF COMMITTEE (In Full)			Tra	ansaction	ID : SC/10.4300	
MCGEE FOR CONGRESS						
LOAN SOURCE Full Name (Last, Andrea Leigh McGee	First, Middle Initial)		Memo Item		ction: 2016 Primary General	
Mailing Address 961 NE 27TH AVENUE					Other (specify)	r
City	State	ZIP Code				
POMPANO BEACH	FL	33062				
Original Amount of Loan	Cumulative	Payment To D	ate	Balance (Outstanding at Clo	ose of This Period
72	.41	, , ,	0.00		7	72.41
Date Incurred MO4 / D13 / Y Ž016	M M / D	Date Due	Interest	t Rate 0.00	% (apr)	Secured:
List All Endorsers or Guarantors	(if any) to Loan Source	ce		_	7 (5-12-7)	Yes No
1. Full Name (Last, First, Middle I	` • • • • • • • • • • • • • • • • • • •		lame of Employer			
Mailing Address		(Occupation			
City	State ZIP Code		amount Guaranteed Outstanding:	1 7		
2. Full Name (Last, First, Middle In	itial)	1	lame of Employer			
Mailing Address		(Occupation			
City	State ZIP Code	(mount Guaranteed Outstanding:	7		
3. Full Name (Last, First, Middle In	itial)	1	lame of Employer			
Mailing Address		(Occupation			-
City	State ZIP Code		amount Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle In	itial)	1	lame of Employer			
Mailing Address		(Occupation			
City	State ZIP Code		mount Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (optional)		·····		7 7	72.41
FOTALS This Period (last page in this	line only)		·····		7 7	
Carry outstanding balance only to LI	NE 3. Schedule D. for	this line. If no	Schedule D. carry	/ forward	to appropriate lir	ne of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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JOANS		Detailed Summary Page	(Crieck Only One) 13a
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transaction	ID : SC/10.4297
LOAN SOURCE Full Name (Last, First, Andrea Leigh McGee	Middle Initial)		ection: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE			Other (specify) ▼
City POMPANO BEACH	State ZIP Co FL 33062	de	
Original Amount of Loan 27.96	Cumulative Payment To	Date Balance	Outstanding at Close of This Period
TERMS Date Incurred M 04 / D 15 / Y 2016 Y		Interest Rate 2/31/16 0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Guaranteed	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	9 1 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (option TOTALS This Period (last page in this line	·		27.96
Carry outstanding balance only to LINE 3,			to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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LOANS		Detailed Summary Pa		13a 13b
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transa	action ID : SC/10.4296	
LOAN SOURCE Full Name (Last, First, Mic Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE	ldle Initial)	Memo Item	Election: 2016	
City	State ZIP Coo	de	-	
POMPANO BEACH	FL 33062			
Original Amount of Loan	Cumulative Payment To	Date Ba	lance Outstanding at Close of	This Period
Date Incurred MO4 Date Incurred 26 Date Incurred Terms Terms Date Incurred Terms Terms Date Incurred Terms Terms Date Incurred Terms Term		Interest Ra 2/31/16 ^Y	te Secure	X
Full Name (Last, First, Middle Initial)	2 Edun Goding	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7 1 7 1 7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9 9	
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch)		7	13.69

Use separate schedule(s)

FOR LINE NUMBER:

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	13b

DANS			Detailed Sumr		(check only one	e) X 13a
AME OF COMMITTEE (In Full)			1	Transaction	n ID : SC/10.4295	
MCGEE FOR CONGRESS						
LOAN SOURCE Full Name (Last, Andrea Leigh McGee Mailing Address	First, Middle Initial)		Memo It		ection: 2016 Primary General Other (specify)	
961 NE 27TH AVENUE				-	Other (specify)	,
City	State	ZIP Cod	е	·		
POMPANO BEACH	FL	33062				
Original Amount of Loan	Cumulati	ve Payment To [Date	Balance	Outstanding at Cl	ose of This Period
47	48	, , ,	0.00			47.48
TERMS Date Incurred M 05 M / D01 D / Y 2016	Y M M /	Date Due	Inte 2/31/16	rest Rate	% (apr)	Secured:
List All Endorsers or Guarantors	if any) to Loan So	ource			3.5 (34)	Yes No
1. Full Name (Last, First, Middle In	• • •		Name of Employ	er		
Mailing Address			Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:	,	7	
2. Full Name (Last, First, Middle In	tial)		Name of Employ	er		
Mailing Address			Occupation			
City	State ZIP Cod	de	Amount Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle In	tial)		Name of Employ	er		
Mailing Address			Occupation			-
City	State ZIP Cod	10	Amount Guaranteed Outstanding:	,		
4. Full Name (Last, First, Middle In	tial)		Name of Employ	er		
Mailing Address			Occupation			
City	State ZIP Cod		Amount Guaranteed Outstanding:		7	
SUBTOTALS This Period This Page (c	ptional)					47.48
TOTALS This Period (last page in this	line only)		·····		7	
Carry outstanding balance only to LIN	IE 3. Schedule D. f	or this line. If n	o Schedule D. c	arry forward	I to appropriate li	ne of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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LUANS	Detailed Summary Page (Check Only One) 13a
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4301
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼
City State POMPANO BEACH FL	ZIP Code 33062
Original Amount of Loan Cumulative Pa	byment To Date Balance Outstanding at Close of This Period 0.00 5.00
M ₀₅ ^M / D ₀₉ / Y Ž016 M M / D D	Date Due Interest Rate Secured: 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	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	s 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)

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OF

LOANS		Detailed Summary Page	13b
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transacti	on ID : SC/10.4330
LOAN SOURCE Full Name (Last, First, Middle In Andrea Leigh McGee	itial)	Memo Item	Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE			Other (specify) ▼
City State POMPANO BEACH FL	ZIP Code 33062		
Original Amount of Loan Cum 5.00	nulative Payment To Da	ate Balan	ce Outstanding at Close of This Period 5.00
Date Incurred M 05 M / D 09 D / Y 2016 Y M M	Date Due	Interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan			
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZIP	Code	Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First, Middle Initial)	N	Name of Employer	
Mailing Address	C	Occupation	
City State ZIP	Code	Amount Guaranteed Dutstanding:	, , , , , , , ,
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	C	Occupation	
City State ZIP	Code	Amount Guaranteed Outstanding:	, , , , , , , ,
4. Full Name (Last, First, Middle Initial)	N	Name of Employer	
Mailing Address	C	Occupation	
City State ZIP	Code	Amount Guaranteed Dutstanding:	y
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 forwa	ard to appropriate line of Summarv.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS			Detailed Summary Pa	
AME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	3		Transa	ction ID : SC/10.4298
LOAN SOURCE Full Name (Last Andrea Leigh McGee		lle Initial)	Memo Item	Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE				Other (specify)
City		State ZIP Co	de	
POMPANO BEACH		FL 33062		
Original Amount of Loan	8.48	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
TERMS Date Incurred M 05 / P 18 / Y 2016	Y M	Date Due	Interest Rat 12/31/16	e Secured: 00 % (apr) Yes No
List All Endorsers or Guarantors		Loan Source		
1. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page	(optional)		······	8.48
TOTALS This Period (last page in the	is line only)		·····	
Carry outstanding balance only to I	INE 3, Sche	dule D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OF

LOANS	Detailed Summary Page (chock chily chic)
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4337
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼
City State POMPANO BEACH FL	ZIP Code 33062
Original Amount of Loan Cumulative	Payment To Date Balance Outstanding at Close of This Period 0.00 47.00
TERMS Date Incurred M 05 M / D 18 D / Y 2016 M M M / D	Date Due Interest Rate Secured: D / 12/31/16 Y 0.00
List All Endorsers or Guarantors (if any) to Loan Sour	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	
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

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NE NUMBER:
Only one)

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OF

LOANS	Detailed Summary Page (Sheak Shily Ship)
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4299
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼
City State POMPANO BEACH FL	ZIP Code 33062
Original Amount of Loan Cumulative 20.63	Balance Outstanding at Close of This Period 0.00 20.63
Date Incurred M 06	Date Due Interest Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Sou	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	
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	r 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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LUANS	Detailed Summary Page (Check only one) 13a
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS	Transaction ID : SC/10.4328
LOAN SOURCE Full Name (Last, First, Middle Initial) Andrea Leigh McGee	Memo Item Election: 2016 Primary General
Mailing Address 961 NE 27TH AVENUE	Other (specify) ▼
City State ZIP Co POMPANO BEACH FL 33062	
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period 0.00 76.85
TERMS Date Incurred Date Due M 06 / D 03 / Y 2016 / Y	e Interest Rate Secured: 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	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)	76.85
TOTALS This Period (last page in this line only)	······································
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	f 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/10.4331 NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Andrea Leigh McGee General Mailing Address Other (specify) \blacktriangledown 961 NE 27TH AVENUE State ZIP Code City FL 33062 POMPANO BEACH Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 2.12 0.00 2.12 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 ^M06^M 03 2016 12/31/16 % (apr) 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 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)..... 2.12 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.

Use separate schedule(s)

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LOANS		Detailed Summary Pa		13a 13b
NAME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transa	ction ID : SC/10.4326	
LOAN SOURCE Full Name (Last, First, Mic Andrea Leigh McGee Mailing Address 961 NE 27TH AVENUE	dle Initial)	Memo Item	Election: 2016 Primary General Other (specify) Very State of the primary Other (specify)	
City	State ZIP Coo	le .		
POMPANO BEACH	FL 33062			
Original Amount of Loan 40.00	Cumulative Payment To	Date Bal	ance Outstanding at Close of	This Period 40.00
Date Incurred M06 / P12 / Y Z016 Y List All Endorsers or Guarantors (if any) to		Interest Rat 2/31/16 O	see Secure .00 % (apr) \square	X
Full Name (Last, First, Middle Initial)	J Louis Goulde	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7 9 9	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 9	
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch)		7 7 7	40.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS		Detailed Summary Page		13a 13b			
AME OF COMMITTEE (In Full) MCGEE FOR CONGRESS		Transaction	on ID : SC/10.4336				
LOAN SOURCE Full Name (Last, First, Middle Andrea Leigh McGee	e Initial)	Memo Item	Election: 2016 Primary General				
Mailing Address 961 NE 27TH AVENUE			Other (specify) ▼				
City S POMPANO BEACH	tate ZIP Code FL 33062)					
Original Amount of Loan 52.53	Cumulative Payment To D	ate Baland	ce Outstanding at Close of This				
TERMS Date Incurred MO6 / P12 / Y Ž016 Y	Date Due	Interest Rate 0.00	Secured: % (apr) Yes	X No			
List All Endorsers or Guarantors (if any) to I 1. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation Amount					
City State	ZIP Code	Guaranteed Outstanding:	, , , , , , ,				
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation Amount					
City State	ZIP Code	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)	1	Name of Employer					
Mailing Address		Occupation					
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 8 1				
OTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Scheo	lule D, for this line. If no	Schedule D, carry forwa	ard to appropriate line of Sumi	mary.			

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			Detailed Summary F		(check only one)	×	13a 13b
AME OF COMMITTEE (In Full)	20		Trans	action I	D : SC/10.4339		
MCGEE FOR CONGRES	55						
LOAN SOURCE Full Name (L Andrea Leigh McGee	ast, First, Middle	Initial)	Memo Item		ction: 2016 Primary General		
Mailing Address 961 NE 27TH AVENUE					Other (specify) ▼		
City	Sta	te ZIP Cod	de				
POMPANO BEACH	F	L 33062					
Original Amount of Loan	Cı	umulative Payment To	Date B	alance (Outstanding at Clos	e of This	Period
	39.75	9 9	0.00		, ,	39.7	5
Date Incurred	D16 Y	Date Due	Interest R	ate 0.00	7	Secured:	$\overline{}$
					% (apr)	Yes	X No
List All Endorsers or Guarant 1. Full Name (Last, First, Midd		an Source	Name of Employer				
1. Tull Name (Last, First, Midt	uie iiiiiai)		Name of Employer				
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	-,			
2. Full Name (Last, First, Midd	le Initial)		Name of Employer				
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	7	,	-	
3. Full Name (Last, First, Midd	le Initial)		Name of Employer				
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	-,			
4. Full Name (Last, First, Midd	le Initial)		Name of Employer				
Mailing Address			Occupation				
City	State Z	IP Code	Amount Guaranteed Outstanding:	7			
SUBTOTALS This Period This Page	ge (optional)		·····		7	39.7	5
TOTALS This Period (last page in	this line only)				7 7	1013.4	7
Carry outstanding balance only to	o LINE 3. Schedu	le D. for this line. If I	no Schedule D. carry fo	orward i	to appropriate line	of Sum	marv.