



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Mark Bray 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))....	11950.69	21065.17
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11950.69	21065.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	8693.29	18137.91
(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)).....	8693.29	18137.91
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5898.40	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	2992.00	

**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

**Mark Bray for Congress**

Report Covering the Period: From:  /  /  To:  /  /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9650.69	16452.11
(ii) Unitemized.....	2300.00	4403.51
(iii) TOTAL of contributions from individuals ▶	11950.69	20855.62
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	209.55
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11950.69	21065.17
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	3000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	3000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1.24	3.14
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11951.93	24068.31

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8693.29	18137.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	32.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8693.29	18169.91

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2639.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11951.93
25. SUBTOTAL (add Line 23 and Line 24).....	14591.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8693.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5898.40

**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 17
	<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)  
**Mark Bray for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**A.J. Albert**

Mailing Address 56 Ledge View Drive

City State Zip Code  
Huntsville AL 35802

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

Name of Employer Occupation  
AJA Inc. President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2560.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2014

**Transaction ID : SA11Al.4380**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve Below**

Mailing Address 13001 Branscomb Road SE

City State Zip Code  
Huntsville AL 35803

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

Name of Employer Occupation  
AAR Mobility Systems Director of Business

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 16 / 2014

**Transaction ID : SA11Al.4384**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Vincent Boles**

Mailing Address 100 Napa Valley Way

City State Zip Code  
Madison AL 35758

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

Name of Employer Occupation  
Self-employed Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 12 / 2014

**Transaction ID : SA11Al.4370**

Amount of Each Receipt this Period  
500.00

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

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

3250.00

**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 17
	<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)  
**Mark Bray for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Chapman**

Mailing Address 115 Oakhurst Drive

City Madison State AL Zip Code 35758

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

Name of Employer Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **954.69**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 25 / 2014**

**Transaction ID : SA11AI.4397**

Amount of Each Receipt this Period  
**3.27**

In-kind - copies

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Davis**

Mailing Address 3017 Brunswick Circle

City Hampton Cove State AL Zip Code 35763

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

Name of Employer Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **224.52**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2014**

**Transaction ID : SA11AI.4399**

Amount of Each Receipt this Period  
**224.52**

In-kind - Office supplies

**C.** Full Name (Last, First, Middle Initial)  
**Jennifer Davis**

Mailing Address 3017 Brunswick Circle

City Hampton Cove State AL Zip Code 35763

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

Name of Employer Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1224.52**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 26 / 2014**

**Transaction ID : SA11AI.4360**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1227.79**

**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 17
	<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)  
**Mark Bray for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Davis**

Mailing Address 3017 Brunswick Circle

City State Zip Code  
Hampton Cove AL 35763

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

Name of Employer Occupation  
Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1297.42

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2014

**Transaction ID : SA11AI.4400**

Amount of Each Receipt this Period  
72.90  
In-kind - Office Supplies

**B.** Full Name (Last, First, Middle Initial)  
**Ivy Downs**

Mailing Address 56 Ledge View Drive

City State Zip Code  
Huntsville AL 35802

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

Name of Employer Occupation  
Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2014

**Transaction ID : SA11AI.4381**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Christel Dunn**

Mailing Address 7 Perth Drive SE

City State Zip Code  
Huntsville AL 35802

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

Name of Employer Occupation  
Morgan Stanley Director of Wealth Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SA11AI.4390**

Amount of Each Receipt this Period  
350.00

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

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

2922.90

**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 17
	<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)  
**Mark Bray for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Johnston**

Mailing Address 501 Franklin Street

City State Zip Code  
Huntsville AL 35801

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

Name of Employer Occupation  
Self-employed Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 10 / 2014

**Transaction ID : SA11Al.4372**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Brent Jordan**

Mailing Address 240 Badger Drive

City State Zip Code  
Harvest AL 35749

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

Name of Employer Occupation  
Hill, & Jordan, PC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : SA11Al.4357**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Amy Montgomery**

Mailing Address 123 Sandusky Way

City State Zip Code  
Florence AL 35630

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

Name of Employer Occupation  
Gateway Construction Co President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2014

**Transaction ID : SA11Al.4382**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<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)  
**Mark Bray for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lana Ritch**

Mailing Address 1600 W Point Drive SE

City Huntsville State AL Zip Code 35801

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

Name of Employer Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : SA11Al.4350**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

9650.69

**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 10 OF 17			
	<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)  
**Mark Bray for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allied Photocopy Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address PO Box 71		Amount of Each Disbursement this Period 123.17 <b>Transaction ID : SB17.4442</b>
City Huntsville	State AL	
Purpose of Disbursement Fans	Category/ Type 006	
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: AL	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Allied Photocopy Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 71		Amount of Each Disbursement this Period 157.18 <b>Transaction ID : SB17.4471</b>
City Huntsville	State AL	
Purpose of Disbursement Banners	Category/ Type 006	
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: AL	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Allied Photocopy Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2014
Mailing Address PO Box 71		Amount of Each Disbursement this Period 182.25 <b>Transaction ID : SB17.4467</b>
City Huntsville	State AL	
Purpose of Disbursement Rack cards/ Banner	Category/ Type 006	
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: AL	District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	462.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 17	
	<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)  
**Mark Bray for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allied Photocopy Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address PO Box 71		Amount of Each Disbursement this Period 244.16 <b>Transaction ID : SB17.4468</b>
City Huntsville	State AL	
Purpose of Disbursement Rack Cards	Category/ Type 006	
Candidate Name <b>Mark Bray for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AL	District: 05	

Full Name (Last, First, Middle Initial) <b>B. BlogTalkRadio</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 275 7th Avenue, 23rd Fl		Amount of Each Disbursement this Period 249.00 <b>Transaction ID : SB17.4484</b>
City New York	State NY	
Purpose of Disbursement Podcasts	Category/ Type 004	
Candidate Name <b>Mark Bray for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AL	District: 05	

Full Name (Last, First, Middle Initial) <b>c. John Chapman</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 115 Oakhurst Drive		Amount of Each Disbursement this Period 3.27 <b>Transaction ID : SB17.4398</b>
City Madison	State AL	
Purpose of Disbursement In-kind - copies	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	496.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Mark Bray for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Davis</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014		
Mailing Address 3017 Brunswick Circle			Amount of Each Disbursement this Period 224.52		
City Hampton Cove	State AL	Zip Code 35763	Transaction ID : SB17.4402		
Purpose of Disbursement In-kind - Office supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Jennifer Davis</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014		
Mailing Address 3017 Brunswick Circle			Amount of Each Disbursement this Period 72.90		
City Hampton Cove	State AL	Zip Code 35763	Transaction ID : SB17.4401		
Purpose of Disbursement In-kind - Office Supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Huntsville Madison County Senior Center</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014		
Mailing Address 2200 Drake Avenue			Amount of Each Disbursement this Period 500.00		
City Huntsville	State AL	Zip Code 35805	Transaction ID : SB17.4452		
Purpose of Disbursement Booth at Senior Expo		Category/ Type 007			
Candidate Name <b>Mark Bray for Congress</b>					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: AL	District: 05				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	797.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 17			
	<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)  
**Mark Bray for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dave Lakin</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 3216 Sandstone Street		Amount of Each Disbursement this Period 2309.36 <b>Transaction ID : SB17.4490</b>
City Hampton Cove	State AL Zip Code 35763	
Purpose of Disbursement Reimbursement for yard signs from Fastsigns		Category/ Type 006
Candidate Name <b>Mark Bray for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AL District: 05		

Full Name (Last, First, Middle Initial) <b>B. Schumacher &amp; Associates (Larry and Walt Brown)</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO Box 700972		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4437</b>
City Tulsa	State OK Zip Code 74170	
Purpose of Disbursement Sig Collecting		Category/ Type 001
Candidate Name <b>Mark Bray for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AL District: 05		

Full Name (Last, First, Middle Initial) <b>c. Schumacher &amp; Associates (Larry and Walt Brown)</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address PO Box 700972		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4438</b>
City Tulsa	State OK Zip Code 74170	
Purpose of Disbursement Sig Collecting		Category/ Type 001
Candidate Name <b>Mark Bray for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AL District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3809.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Mark Bray for Congress**

Full Name (Last, First, Middle Initial) <b>A. Schumacher &amp; Associates (Larry and Walt Brown)</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address PO Box 700972		Amount of Each Disbursement this Period 970.00 <b>Transaction ID : SB17.4439</b>
City Tulsa	State OK	
Zip Code 74170	Purpose of Disbursement Sig Collecting	Category/ Type 001
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AL District: 05	

Full Name (Last, First, Middle Initial) <b>B. Schumacher &amp; Associates (Larry and Walt Brown)</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address PO Box 700972		Amount of Each Disbursement this Period 494.00 <b>Transaction ID : SB17.4440</b>
City Tulsa	State OK	
Zip Code 74170	Purpose of Disbursement Sig Collecting	Category/ Type 001
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AL District: 05	

Full Name (Last, First, Middle Initial) <b>c. The Clarion</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 2819 Veterans Drive		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.4479</b>
City Scottsboro	State AL	
Zip Code 35769	Purpose of Disbursement Ad in newspaper	Category/ Type 004
Candidate Name <b>Mark Bray for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AL District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2014.00
<b>TOTAL</b> This Period (last page this line number only).....	7579.81

**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)  
**Mark Bray for Congress**

Transaction ID : **SC/10.4298**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Dennis Clements**

Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
107 Oak Spring Circle

City State ZIP Code  
New Market AL 35761

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1500.00 0.00 1500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No  
05 / 09 / 2014 / 5/9/16

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)..... ▶ 1500.00

**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) **Mark Bray for Congress** Transaction ID : **SC/10.4299**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Jodie Clements</b>	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 107 Oak Spring Circle	

City	State	ZIP Code
New Market	AL	35761

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 09 / Y 2014	M / D / Y 5/9/16	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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	1500.00
<b>TOTALS</b> This Period (last page in this line only).....	3000.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Mark Bray for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Schumacher & Associates (Larry and Walt Brown)**

Mailing Address PO Box 700972

City State Zip Code  
 Tulsa OK 74170

Nature of Debt (Purpose):  
 petition signature collecting

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4262</b>	
<input type="text" value="2956.00"/>	Amount Incurred This Period	Payment This Period
<input type="text" value="0.00"/>	<input type="text" value="2964.00"/>	Outstanding Balance at Close of This Period
		<input type="text" value="-8.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="-8.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="-8.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>