

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Mike Bost for Congress Committee

ADDRESS (number and street) ▼

PO Box 1212

Check if different than previously reported. (ACC)

Murphysboro

IL

62966-1212

2. **FEC IDENTIFICATION NUMBER** ▼

C C00546499

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

12

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

10 / 01 / 2013

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Deborah Pittman

Signature of Treasurer Deborah Pittman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

01 / 30 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Mike Bost for Congress Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

	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))	63000.92	141136.92
(b) Total Contribution Refunds (from Line 20(d))	1100	1100
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	61900.92	140036.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	62019.3	96502.35
(b) Total Offsets to Operating Expenditures (from Line 14)	0	14.9
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	62019.3	96487.45
8. Cash on Hand at Close of Reporting Period (from Line 27)	43549.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

Mike Bost for Congress Committee

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).....	35515.92	97865.92
(ii) Unitemized.....	9235	16921
(iii) TOTAL of contributions from individuals ▶	44750.92	114786.92
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	18250	26350
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	63000.92	141136.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	14.9
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	63000.92	141151.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62019.3	96502.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1100	1100
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1100	1100
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	63119.3	97602.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	43667.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63000.92
25. SUBTOTAL (add Line 23 and Line 24).....	106668.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	63119.3
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	43549.47

**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 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Lee Crisp

Mailing Address 2605 W Main Street

City Marion State IL Zip Code 62959-4932

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

Name of Employer Pepsi MidAmerica Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2013

Transaction ID : A-CF221

Amount of Each Receipt this Period
1250

B. Full Name (Last, First, Middle Initial)
Judy A. Baine

Mailing Address 600 Baine Drive

City Carbondale State IL Zip Code 62901-5157

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2013

Transaction ID : A-CF222

Amount of Each Receipt this Period
600

C. Full Name (Last, First, Middle Initial)
Judy A. Baine

Mailing Address 600 Baine Drive

City Carbondale State IL Zip Code 62901-5157

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2013

Transaction ID : A-CF223

Amount of Each Receipt this Period
400

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

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

2250.00

**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 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Z and J Auto Sales

Mailing Address 112 Murphy Street

City: Murphysboro State: IL Zip Code: 62966-2265

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 21 / 2013

Transaction ID : A-CF217

Amount of Each Receipt this Period: 500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Ziad Aldroubi

Mailing Address 112 Murphy Street

City: Murphysboro State: IL Zip Code: 62966-2265

FEC ID number of contributing federal political committee: C

Name of Employer: Z and J Auto Sales Occupation: Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 21 / 2013

Transaction ID : A-PIP1

Amount of Each Receipt this Period: 500

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
William Black

Mailing Address 31 Highland Shore Drive

City: Danville State: IL Zip Code: 61832-1347

FEC ID number of contributing federal political committee: C

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 10 / 21 / 2013

Transaction ID : A-CF215

Amount of Each Receipt this Period: 1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. James A. Bolinski

Mailing Address 802 Ritter Street
Apt. A

City Pinckneyville State IL Zip Code 62274-1573

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF213

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Lee Daniels

Mailing Address 105 S York Street
Suite 500

City Elmhurst State IL Zip Code 60126-3454

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

Name of Employer Information Requested Occupation Information Requested
 Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF216

Amount of Each Receipt this Period
250

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

Mailing Address 2215 York Road
Suite 500

City Oak Brook State IL Zip Code 60523-4014

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF218

Amount of Each Receipt this Period
1000

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Marc Levine

Mailing Address 905 Greenleaf Avenue

City State Zip Code
Wilmette IL 60091-2704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF209

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Louis Mervis

Mailing Address 2001 N Logan Avenue

City State Zip Code
Danville IL 61832-1621

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF214

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
William Smithburg

Mailing Address 676 N Michigan Avenue Suite 3860

City State Zip Code
Chicago IL 60611-2837

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

Name of Employer Information Requested Occupation Information Requested
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : A-CF208

Amount of Each Receipt this Period
500

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Sam Vinson

Mailing Address **3 First National Plaza**
Suite 3500

City **Chicago** State **IL** Zip Code **60602-5010**

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

Name of Employer **Ungaretti and Harris LLP** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2013

Transaction ID : A-CF210

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
George Obernagel III

Mailing Address **4 Country Lakes Lane**

City **Waterloo** State **IL** Zip Code **62298-2900**

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

Name of Employer **Self-Employed** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1915.92**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 13 / 2013

Transaction ID : A-IF370

Amount of Each Receipt this Period
965.92

Inkind: In Kind Event Catering

C. Full Name (Last, First, Middle Initial)
KBN Foods LLC

Mailing Address **307 Sycamore Drive**

City **Waterloo** State **IL** Zip Code **62298-1737**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 18 / 2013

Transaction ID : A-CF273

Amount of Each Receipt this Period
250

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

2215.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Russ Row

Mailing Address 307 Sycamore Drive

City Waterloo State IL Zip Code 62298-1737

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

Name of Employer KBN Foods LLC Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-PIP2

Amount of Each Receipt this Period
250

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Mr. James A. Bolinski

Mailing Address 802 Ritter Street
Apt. A

City Pinckneyville State IL Zip Code 62274-1573

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-CF265

Amount of Each Receipt this Period
50

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

Mailing Address 2879 Ava Road

City Murphysboro State IL Zip Code 62966-4178

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

Name of Employer Self-Employed Occupation Auctioneer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-CF289

Amount of Each Receipt this Period
350

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Thomas E Nobbe

Mailing Address 302 Wedgewood Drive

City Waterloo State IL Zip Code 62298-1632

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

Name of Employer Nobbe Company Inc Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-CF275

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
George Obernagel III

Mailing Address 4 Country Lakes Lane

City Waterloo State IL Zip Code 62298-2900

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1915.92**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-CF276

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Laura Porter

Mailing Address 610 Cottonwood Lane

City Du Quoin State IL Zip Code 62832-3827

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

Name of Employer Fare Foods Corp. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2013

Transaction ID : A-CF268

Amount of Each Receipt this Period
250

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

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

750.00

**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 12 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. John W. Rowe

Mailing Address PO Box 805398

City Chicago State IL Zip Code 60680-4183

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 20 / 2013

Transaction ID : A-CF297

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Debby Morber

Mailing Address 1 Williams Lane

City Ava State IL Zip Code 62907-2638

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 21 / 2013

Transaction ID : A-CF291

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
17th St. Bar & Grill

Mailing Address 214 N 17th Street

City Murphysboro State IL Zip Code 62966-2047

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **0**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF337

Amount of Each Receipt this Period
500

Refund Pending

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Rance Akin

Mailing Address PO Box 626

City State Zip Code
Murphysboro IL 62966-0626

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF335

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dan Bost

Mailing Address 45 Wolf Hill Road

City State Zip Code
Murphysboro IL 62966-3020

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF331

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mrs. Peggy Bost

Mailing Address 1212 N 16th Street

City State Zip Code
Murphysboro IL 62966-2909

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF340

Amount of Each Receipt this Period
100

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Terri Bryant

Mailing Address 457 Lee Lane

City State Zip Code
Murphysboro IL 62966-6431

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

Name of Employer Occupation
IL Department of Corrections Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF315

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Ramon Campos

Mailing Address 1101 N 16th Street

City State Zip Code
Murphysboro IL 62966-2908

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
207

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF313

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mr. Mark D Denzler

Mailing Address 2224 Renwick Drive

City State Zip Code
Springfield IL 62704-6701

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF301

Amount of Each Receipt this Period
500

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. Morris L Harvey

Mailing Address 5 Webster Hill Estate

City State Zip Code
Mount Vernon IL 62864-2346

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF305

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Herbert W. Hicks

Mailing Address

City State Zip Code
Murphysboro IL 62966

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF328

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Leroy Keehn

Mailing Address 83 Lee Lane

City State Zip Code
Murphysboro IL 62966-6429

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF302

Amount of Each Receipt this Period
300

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

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

800.00

**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 16 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Carol Klaine

Mailing Address 1766 W Harrison Road

City State Zip Code
Murphysboro IL 62966-4541

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

Name of Employer Occupation
State of Illinois Legislative Asst.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF318

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Patty L. Koenig

Mailing Address 404 Winters Lane

City State Zip Code
Murphysboro IL 62966-6145

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

Name of Employer Occupation
Country Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF316

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Patricia Stanton

Mailing Address 1 C Circle Drive

City State Zip Code
Murphysboro IL 62966-4272

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
212

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : A-CF333

Amount of Each Receipt this Period
100

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

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

600.00

**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 17 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Martin Twenhafel

Mailing Address 101 Twenhafel Lane

City State Zip Code
Gorham IL 62940-2410

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF325

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Randy Winn

Mailing Address 2 Fairway Drive

City State Zip Code
Mount Vernon IL 62864-2624

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 27 / 2013

Transaction ID : A-CF306

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Steven Rauschenberger

Mailing Address 422 N Worth Avenue

City State Zip Code
Elgin IL 60123-3451

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

Name of Employer Information Requested Occupation Information Requested
Self-Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 04 / 2013

Transaction ID : A-CF343

Amount of Each Receipt this Period
400

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

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

900.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 52

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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
George W. Beck

Mailing Address 629 Seville Drive

City State Zip Code
 Mount Vernon IL 62864-7001

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

Name of Employer Occupation
 Durham School Transportation Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : A-CF382

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Tyrone Fahner

Mailing Address 2437 Sheridan Road

City State Zip Code
 Evanston IL 60201-2939

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

Name of Employer Occupation
 Mayer Brown Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : A-CF387

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Mr. Donald V Fites

Mailing Address 9943 Brassie Bend

City State Zip Code
 Naples FL 34108-1923

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

Name of Employer Occupation
 None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : A-CF384

Amount of Each Receipt this Period
 500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 52
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Mr. Wayne L Krehbiel		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address PO Box 846		Transaction ID : A-CF383	
City Mount Vernon	State IL	Zip Code 62864-0017	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) B. Mr. Jay Shattuck		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 10 Country Lake Road		Transaction ID : A-CF386	
City Springfield	State IL	Zip Code 62711-6116	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Shattuck & Associates	Occupation Lobbyist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) C. Alexander D Stuart		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 506 Washington Road		Transaction ID : A-CF385	
City Lake Forest	State IL	Zip Code 60045-2326	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00

**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 20 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Hunt Bonan

Mailing Address 815 N 27th Street

City State Zip Code
Mount Vernon IL 62864-2875

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : A-CF390

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Trace Brown

Mailing Address PO Box 2496

City State Zip Code
Carbondale IL 62902-2496

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

Name of Employer Occupation
Self-Employed Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : A-CF397

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Terri Bryant

Mailing Address 457 Lee Lane

City State Zip Code
Murphysboro IL 62966-6431

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

Name of Employer Occupation
IL Department of Corrections Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : A-CF392

Amount of Each Receipt this Period
100
9982

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

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

600.00

**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 21 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Rae J Cummins

Mailing Address 15679 N Turrell Lane

City State Zip Code
Mount Vernon IL 62864-8608

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

Name of Employer Occupation
Community First Bank Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2013

Transaction ID : A-CF391

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. James R. Ahrenholz

Mailing Address 1821 N. 17th St.

City State Zip Code
Mount Vernon IL 62864

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : A-CF457

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. James A. Bolinski

Mailing Address 802 Ritter Street
Apt. A

City State Zip Code
Pinckneyville IL 62274-1573

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : A-CF402

Amount of Each Receipt this Period
50

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

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

550.00

**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 22 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. Glen D. Hollensbe

Mailing Address **PO Box 1267**

City **Mount Vernon** State **IL** Zip Code **62864-0026**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF454

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Matthew O'Shea

Mailing Address **20541 McGilvray Drive**

City **Crest Hill** State **IL** Zip Code **60403-0868**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF399

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Robert E Ryan

Mailing Address **195 N Harbor Drive
Apt. 2703**

City **Chicago** State **IL** Zip Code **60601-7531**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF400

Amount of Each Receipt this Period
250

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 23 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Robin R Stowers

Mailing Address 3612 Victoria Avenue

City State Zip Code
Mount Vernon IL 62864-2208

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF404

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
James R Thompson

Mailing Address 57 E Delaware Place
Apt. 3402

City State Zip Code
Chicago IL 60611-1631

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF401

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
John DeBlasio

Mailing Address 1550 N State Parkway
Apt. A1

City State Zip Code
Chicago IL 60610-7928

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

Name of Employer Information Requested Occupation Information Requested
FA Development Corp. Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2013

Transaction ID : A-CF407

Amount of Each Receipt this Period
500

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

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

1750.00

**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 24 OF 52
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

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

Mailing Address 680 N Green Street
Apt. 605

City Chicago State IL Zip Code 60642-6081

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

Name of Employer Nicolay and Dart Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : A-CF414

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Jane Hayes Rader

Mailing Address 975 Bell Hill Road

City Cobden State IL Zip Code 62920-3415

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : A-CF413

Amount of Each Receipt this Period
1600

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

Mailing Address 214 N 17th Street

City Murphysboro State IL Zip Code 62966-2047

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

Name of Employer 17th Street Bar and Grill Occupation Restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : A-CF453

Amount of Each Receipt this Period
500

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

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

2600.00

**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 25 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
Collin Cain

Mailing Address 8355 State Route 146 W

City Jonesboro State IL Zip Code 62952-2611

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

Name of Employer Serf-Grassy Lake Hunt Club Occupation Owner - Hunt Club

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : A-CF427

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
James Crane

Mailing Address 6335 State Rd 146W

City Jonesboro State IL Zip Code 62952

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

Name of Employer American River Trans. Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : A-CF429

Amount of Each Receipt this Period
600

C. Full Name (Last, First, Middle Initial)
Dean L Buntrock

Mailing Address 300 E 8th Street

City Hinsdale State IL Zip Code 60521-4504

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : A-CF442

Amount of Each Receipt this Period
2600

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

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

5700.00

**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 26 OF 52
	<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)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
David W Grainger

Mailing Address 100 Grainger Parkway

City Lake Forest State IL Zip Code 60045-5202

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

Name of Employer WW Grainger Inc Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : A-CF441

Amount of Each Receipt this Period
 2600

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 M / D 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 M / D 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).....

2600.00

35515.92

**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 27 OF 52
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. Full Name (Last, First, Middle Initial)
John S Fund

Mailing Address **PO Box 853**

City **Edwardsville** State **IL** Zip Code **62025-0853**

FEC ID number of contributing federal political committee. **C C00390831**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2013

Transaction ID : A-CF207

Amount of Each Receipt this Period
 _____ 5000

B. Full Name (Last, First, Middle Initial)
American Water Federal PAC

Mailing Address **1025 Laurel Oak Road**

City **Voorhees** State **NJ** Zip Code **08043-3506**

FEC ID number of contributing federal political committee. **C C00354548**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF406

Amount of Each Receipt this Period
 _____ 500

C. Full Name (Last, First, Middle Initial)
The Duchossois Group PAC

Mailing Address **845 N Larch Avenue**

City **Elmhurst** State **IL** Zip Code **60126-1114**

FEC ID number of contributing federal political committee. **C C00212308**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 11 / 2013

Transaction ID : A-CF405

Amount of Each Receipt this Period
 _____ 5000

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

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

_____ 10500.00

**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 28 OF 52
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mike Bost for Congress Committee

A. American Academy of Pediatric Dentistry PAC

Full Name (Last, First, Middle Initial)
American Academy of Pediatric Dentistry PAC

Mailing Address 211 E Chicago Avenue
Suite 700

City Chicago State IL Zip Code 60611-2663

FEC ID number of contributing federal political committee. **C** C00365965

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : A-CF436

Amount of Each Receipt this Period
 250

B. American Association of Orthodontists PAC

Full Name (Last, First, Middle Initial)
American Association of Orthodontists PAC

Mailing Address 401 N Lindbergh Boulevard

City Saint Louis State MO Zip Code 63141-7839

FEC ID number of contributing federal political committee. **C** C00293910

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : A-CF437

Amount of Each Receipt this Period
 5000

C. ROSKAM PAC

Full Name (Last, First, Middle Initial)
ROSKAM PAC

Mailing Address 610 S Boulevard

City Tampa State FL Zip Code 33606-2693

FEC ID number of contributing federal political committee. **C** C00451294

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : A-CF434

Amount of Each Receipt this Period
 2500

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

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

7750.00

18250.00

**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 29 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Bankcard USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 28720 Roadside Drive Suite 299		Amount of Each Disbursement this Period 22.49
City Agoura Hills	State CA Zip Code 91301-4574	
Purpose of Disbursement CC Merchant Fee	Category/Type 001	Transaction ID : B-E-244
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	Transaction ID : B-E-240
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 71.88
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	Transaction ID : B-E-241
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	97.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 57.5
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Transaction ID : B-E-250
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capital One		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address PO Box 6492		Amount of Each Disbursement this Period 4359.18
City Carol Stream	State IL	
Zip Code 60197-6492	Purpose of Disbursement See Memo Entires	Transaction ID : B-E-219
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) C. Silkworm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 102 S Sezmore Drive		Amount of Each Disbursement this Period 2979.49
City Murphysboro	State IL	
Zip Code 62966-7046	Purpose of Disbursement Printing	Transaction ID : B-S-5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(10/11/13)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4416.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Priceline.com		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 800 Connecticut Avenue		Amount of Each Disbursement this Period 321.48
City Norwalk State CT Zip Code 06854-1631	Purpose of Disbursement Lodging	Transaction ID : B-S-6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(10/11/13)
State: District:		

Full Name (Last, First, Middle Initial) B. Circle K 1357		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 111 E Walnut Street		Amount of Each Disbursement this Period 434.42
City Murphysboro State IL Zip Code 62966-7001	Purpose of Disbursement Fuel	Transaction ID : B-S-4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(10/11/13)
State: District:		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 276.8
City Fort Worth State TX Zip Code 76155-2605	Purpose of Disbursement Airfare	Transaction ID : B-S-7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(10/11/13)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 1.44 Transaction ID : B-E-242
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.88 Transaction ID : B-E-243
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 Transaction ID : B-E-229
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Administrative/Salary/Overhead: Software	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	654.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 Transaction ID : B-E-230
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bankcard USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 28720 Roadside Drive Suite 299		Amount of Each Disbursement this Period 133.56 Transaction ID : B-E-246
City Agoura Hills State CA Zip Code 91301-4574	Purpose of Disbursement CC Transaction Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 2470 Daniels Bridge Road Suite 121		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-231
City Athens State GA Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2283.56
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 201 N Union Street Suite 200		Amount of Each Disbursement this Period 275.97 Transaction ID : B-E-228
City Alexandria State VA Zip Code 22314-2651	Purpose of Disbursement Online Advertising Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Weatherford Design Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 2995		Amount of Each Disbursement this Period 1070 Transaction ID : B-E-232
City Carbondale State IL Zip Code 62902-2995	Purpose of Disbursement Administrative/Salary/Overhead: Signs Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Winning Systems		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 105 S York Street Floor 5		Amount of Each Disbursement this Period 16490.13 Transaction ID : B-E-233
City Elmhurst State IL Zip Code 60126-3455	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17836.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	001	Transaction ID : B-E-249
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 7.19
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	001	Transaction ID : B-E-248
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	001	Transaction ID : B-E-245
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Bankcard USA		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 28720 Roadside Drive Suite 299		Amount of Each Disbursement this Period 37.9 Transaction ID : B-E-364
City Agoura Hills State CA Zip Code 91301-4574	Purpose of Disbursement CC Transaction Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NAACP of Carbondale		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address PO Box 3303		Amount of Each Disbursement this Period 500 Transaction ID : B-E-264
City Carbondale State IL Zip Code 62902-3303	Purpose of Disbursement Advertising 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address 2470 Daniels Bridge Road Suite 121		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-259
City Athens State GA Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2037.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Schwebel Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address 1408 Walnut Street		Amount of Each Disbursement this Period 45 Transaction ID : B-E-262
City Murphysboro	State IL	
Zip Code 62966-2030	Purpose of Disbursement Administrative/Salary/Overhead: Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Solid Impressions		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address 1010 W Fullerton Avenue Suite D		Amount of Each Disbursement this Period 963.75 Transaction ID : B-E-260
City Addison	State IL	
Zip Code 60101-4333	Purpose of Disbursement Direct Mail	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. XPress Professional Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2013
Mailing Address 1301 W 22nd Street Accounting Dept		Amount of Each Disbursement this Period 6000 Transaction ID : B-E-263
City Oak Brook	State IL	
Zip Code 60523-2006	Purpose of Disbursement Website Maintenance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7008.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	Transaction ID : B-E-258
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capital One		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 6492		Amount of Each Disbursement this Period 499.38
City Carol Stream	State IL Zip Code 60197-6492	
Purpose of Disbursement See Memo Entries	Category/Type 001	Transaction ID : B-E-235
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address South Illinois Ave.		Amount of Each Disbursement this Period 228
City Carbondale	State IL Zip Code 62901	
Purpose of Disbursement Travel Expense	Category/Type 001	Transaction ID : B-S-12
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(11/13/13)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	502.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Union League Club of Chicago		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 65 W Jackson Boulevard		Amount of Each Disbursement this Period 238.8
City Chicago	State IL Zip Code 60604-3507	
Purpose of Disbursement Meeting Expense	Category/Type 001	Transaction ID : B-S-13 [MEMO ITEM] Subitemization of Capital One(11/13/13)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. George Obernagel III		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 4 Country Lakes Lane		Amount of Each Disbursement this Period 965.92
City Waterloo	State IL Zip Code 62298-2900	
Purpose of Disbursement Inkind: In Kind Event Catering	Category/Type	Transaction ID : B-I-370
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Matthew Moberly		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 1061 E Park Street Apt. 27		Amount of Each Disbursement this Period 993.87
City Carbondale	State IL Zip Code 62901-4031	
Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/Type 001	Transaction ID : B-E-360
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1959.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 20.13 Transaction ID : B-E-365
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Silkworm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 102 S Sezmore Drive		Amount of Each Disbursement this Period 565.61 Transaction ID : B-E-359
City Murphysboro	State IL Zip Code 62966-7046	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Solid Impressions		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 1010 W Fullerton Avenue Suite D		Amount of Each Disbursement this Period 857.56 Transaction ID : B-E-358
City Addison	State IL Zip Code 60101-4333	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1443.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Solid Impressions		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 1010 W Fullerton Avenue Suite D		Amount of Each Disbursement this Period 951.74 Transaction ID : B-E-361
City Addison State IL Zip Code 60101-4333	Purpose of Disbursement Direct Mail 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Silkworm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 102 S Sezmore Drive		Amount of Each Disbursement this Period 281.45 Transaction ID : B-E-357
City Murphysboro State IL Zip Code 62966-7046	Purpose of Disbursement Administrative/Salary/Overhead: Printing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Polar Investments and Insurance Services Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 300 E Main Street Suite 1		Amount of Each Disbursement this Period 525 Transaction ID : B-E-355
City Carbondale State IL Zip Code 62901-3029	Purpose of Disbursement Insurance 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1758.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. XPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 220 E Adams Street		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-356
City Springfield	State IL	
Zip Code 62701-1123	Purpose of Disbursement Administrative/Salary/Overhead: Website	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Rep. Mike Bost		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 2101 Walnut Street		Amount of Each Disbursement this Period 186.76 Transaction ID : B-E-354
City Murphysboro	State IL	
Zip Code 62966-1913	Purpose of Disbursement No Itemization Necessary: Meet	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) C. Polar Investments and Insurance Services Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 300 E Main Street Suite 1		Amount of Each Disbursement this Period 400 Transaction ID : B-E-367
City Carbondale	State IL	
Zip Code 62901-3029	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3586.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 52	
	<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)
Mike Bost for Congress Committee

A. ADLEXX

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 9594

City Springfield State IL Zip Code 62791-9594

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2013

Amount of Each Disbursement this Period: 2800.7

Transaction ID : B-E-352

Category/Type: 001

B. Matthew Moberly

Full Name (Last, First, Middle Initial)
Mailing Address 1061 E Park Street Apt. 27

City Carbondale State IL Zip Code 62901-4031

Purpose of Disbursement Fuel Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2013

Amount of Each Disbursement this Period: 36.81

Transaction ID : B-E-353

Category/Type: 001

C. Matthew Moberly

Full Name (Last, First, Middle Initial)
Mailing Address 1061 E Park Street Apt. 27

City Carbondale State IL Zip Code 62901-4031

Purpose of Disbursement Administrative/Salary/Overhead: Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 29 / 2013

Amount of Each Disbursement this Period: 993.88

Transaction ID : B-E-350

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 3831.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 Transaction ID : B-E-347
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Administrative/Salary/Overhead: Database Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 2470 Daniels Bridge Road Suite 121		Amount of Each Disbursement this Period 1558.42 Transaction ID : B-E-348
City Athens State GA Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bankcard USA		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 28720 Roadside Drive Suite 299		Amount of Each Disbursement this Period 37.9 Transaction ID : B-E-369
City Agoura Hills State CA Zip Code 91301-4574	Purpose of Disbursement CC Transaction Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2246.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. NAACP of Carbondale		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address PO Box 3303		Amount of Each Disbursement this Period 300 Transaction ID : B-E-344
City Carbondale	State IL	
Zip Code 62902-3303	Purpose of Disbursement Event Tickets	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 23 Transaction ID : B-E-472
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Matthew Moberly		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 1061 E Park Street Apt. 27		Amount of Each Disbursement this Period 157.3 Transaction ID : B-E-345
City Carbondale	State IL	
Zip Code 62901-4031	Purpose of Disbursement No Itemization Necessary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	480.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	Transaction ID : B-E-467
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bann Enterprises LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 7307 Laketree Drive		Amount of Each Disbursement this Period 6215
City Fairfax Station	State VA Zip Code 22039-2936	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	Category/Type 001	Transaction ID : B-E-371
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Henry Printing Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address PO Box 2706 975 Charles Rd		Amount of Each Disbursement this Period 284
City Carbondale	State IL Zip Code 62902-2706	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	Category/Type 001	Transaction ID : B-E-373
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6513.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 57.5 Transaction ID : B-E-388
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Silkworm, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 102 S Sezmore Drive		Amount of Each Disbursement this Period 271.93 Transaction ID : B-E-389
City Murphysboro	State IL Zip Code 62966-7046	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 14.38 Transaction ID : B-E-398
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	343.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 144 2nd Street Floor 1		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type 001	Transaction ID : B-E-465
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Compliance Software	Category/Type 001	Transaction ID : B-E-408
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address PO Box 6492		Amount of Each Disbursement this Period 1397.59
City Carol Stream	State IL Zip Code 60197-6492	
Purpose of Disbursement See Memo Entries	Category/Type 001	Transaction ID : B-E-366
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2076.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 52			
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address PO Box 9688		Amount of Each Disbursement this Period 268.11
City Mission Hills	State CA	
Zip Code 91346-9688	Purpose of Disbursement Telephone	Transaction ID : B-S-22
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(12/13/13)
State: District:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address Lambert International Airport		Amount of Each Disbursement this Period 1102.81
City St. Louis	State MO	
Zip Code 63100	Purpose of Disbursement Airfare	Transaction ID : B-S-23
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Capital One(12/13/13)
State: District:		

Full Name (Last, First, Middle Initial) C. Matthew Moberly		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 1061 E Park Street Apt. 27		Amount of Each Disbursement this Period 993.87
City Carbondale	State IL	
Zip Code 62901-4031	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Transaction ID : B-E-410
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	993.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Matthew Moberly			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 1061 E Park Street Apt. 27			Amount of Each Disbursement this Period 37.64	
City Carbondale	State IL	Zip Code 62901-4031	Transaction ID : B-E-411	
Purpose of Disbursement No Itemization Necessary		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Piryx, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 144 2nd Street Floor 1			Amount of Each Disbursement this Period 120.75	
City San Francisco	State CA	Zip Code 94105-3718	Transaction ID : B-E-466	
Purpose of Disbursement CC Transaction Fees		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Matthew Moberly			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 1061 E Park Street Apt. 27			Amount of Each Disbursement this Period 54.68	
City Carbondale	State IL	Zip Code 62901-4031	Transaction ID : B-E-432	
Purpose of Disbursement Fuel Reimbursement		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	213.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 52	
	<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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. Matthew Moberly		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 1061 E Park Street Apt. 27		Amount of Each Disbursement this Period 993.88 Transaction ID : B-E-433
City Carbondale	State IL Zip Code 62901-4031	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	993.88
TOTAL This Period (last page this line number only).....	61288.73

**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 52 OF 52	
	<input type="checkbox"/> 17 <input checked="" 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)
Mike Bost for Congress Committee

Full Name (Last, First, Middle Initial) A. 17th St. Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 214 N 17th Street		Amount of Each Disbursement this Period 500 Transaction ID : B-E-349
City Murphysboro	State IL	
Zip Code 62966-2047	Purpose of Disbursement Contribution Refund: Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jane Hayes Rader		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 975 Bell Hill Road		Amount of Each Disbursement this Period 600 Transaction ID : B-E-440
City Cobden	State IL	
Zip Code 62920-3415	Purpose of Disbursement Contribution Refund: Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	1100.00