

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 TED YOHO FOR CONGRESS

ADDRESS (number and street) 5745 SW 75TH STREET, #283 GAINESVILLE FL 32608 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00494583 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT FL 03

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 ... in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on ... in the State of

5. Covering Period 07 / 01 / 2017 through 09 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JACKSON, LAURA, , Type or Print Name of Treasurer Signature of Treasurer JACKSON, LAURA, , [Electronically Filed] Date 10 / 13 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TED YOHO FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	202875.00	316702.01
(b) Total Contribution Refunds (from Line 20(d))	10250.00	10400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	192625.00	306302.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31598.52	177299.27
(b) Total Offsets to Operating Expenditures (from Line 14).....	475.00	6343.47
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	31123.52	170955.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	318031.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TED YOHO FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y
09 / 30 / 2017

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).....	177325.00	224527.01
(ii) Unitemized	4050.00	5675.00
(iii) TOTAL of contributions from individuals ▶	181375.00	230202.01
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	21500.00	86500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	202875.00	316702.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	475.00	6343.47
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	203350.00	323045.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31598.52	177299.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	10250.00	10250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	150.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10250.00	10400.00
21. OTHER DISBURSEMENTS	150.00	20852.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41998.52	208551.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	156680.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	203350.00
25. SUBTOTAL (add Line 23 and Line 24).....	360030.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41998.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	318031.91

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

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

FOR LINE NUMBER: PAGE 5 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ADOLFSSON, MARCUS, , MR.,
Mailing Address 1478 SW 90TH ST.
City GAINESVILLE State FL Zip Code 32607
FEC ID number of contributing federal political committee. C
Name of Employer MOBILE NATIONS Occupation CEO
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20357
Amount of Each Receipt this Period
5400.00
 Memo Item
REATTRIBUTION REQUESTED

B. Full Name (Last, First, Middle Initial)
BARR, TONY, , ,
Mailing Address 2804 NW 48TH TERR
City GAINESVILLE State FL Zip Code 32606
FEC ID number of contributing federal political committee. C
Name of Employer BARR SYSTEMS, INC. Occupation SOFTWARE
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20302
Amount of Each Receipt this Period
250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BIELLING, KATHY, B, ,
Mailing Address 6074 WEST STATE ROAD 238
City LAKE BUTLER State FL Zip Code 32054
FEC ID number of contributing federal political committee. C
Name of Employer LAND & HOMES Occupation REALTOR
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017
Transaction ID : SA11AI.20205
Amount of Each Receipt this Period
1000.00
 Memo Item

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

6650.00

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

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

FOR LINE NUMBER: PAGE 6 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOYES, PATRICE, , ,

Mailing Address 261SOUTHWEST 129TH TERRACE

City NEWBERRY	State FL	Zip Code 32669
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20283

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BROOM, TIM, G, ,

Mailing Address 14818 NW 45TH PL.

City NEWBERRY	State FL	Zip Code 32689
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FEC ID number of contributing federal political committee. **C**

Name of Employer ITPROTV	Occupation CEO
-----------------------------	-------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20369

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BUTLER, DEBORAH, J, ,

Mailing Address PO BOX 141105

City GAINESVILLE	State FL	Zip Code 32614
---------------------	-------------	-------------------

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

Name of Employer BUTLER PLAZA	Occupation OWNER
----------------------------------	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20347

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

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

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

_____ 5900.00

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

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

FOR LINE NUMBER: PAGE 7 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BYRD, BENITA, , ,

Mailing Address 1327 NE MANDARIN RD.

City: BRANFORD State: FL Zip Code: 32008

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 22 / 2017

Transaction ID : SA11AI.20210

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BYRD, PAUL, , ,

Mailing Address 376 SE PEARL FLETCHER RD

City: BRANFORD State: FL Zip Code: 32008

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 22 / 2017

Transaction ID : SA11AI.20211

Amount of Each Receipt this Period: 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHANDLER, ALAN, , MR.,

Mailing Address PO BOX 1199

City: NEWBERRY State: FL Zip Code: 32669

FEC ID number of contributing federal political committee: C

Name of Employer: AAG ENVIRONMENTAL INC Occupation: SCIENTIST

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 30 / 2017

Transaction ID : SA11AI.20374

Amount of Each Receipt this Period: 250.00

Memo Item

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 8 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHESHIRE, LARRY, H, MR.,
 Mailing Address 1325 NW 53RD AVE., STE. E
 City Gainesville State FL Zip Code 32609
 FEC ID number of contributing federal political committee. C
 Name of Employer CHESHIRE COMPANIES Occupation REAL ESTATE INVESTOR
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20348
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CHESHIRE, DEAN, , ,
 Mailing Address 1325 NW 53RD AVE STE E
 City Gainesville State FL Zip Code 32609
 FEC ID number of contributing federal political committee. C
 Name of Employer ALACHUA COUNTY Occupation TEACHER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20291
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
CHESHIRE, KYLE, D., ,
 Mailing Address 3815 NW 57TH TERRACE
 City Gainesville State FL Zip Code 32606
 FEC ID number of contributing federal political committee. C
 Name of Employer CHESHIRE REALTY Occupation REAL ESTATE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20292
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

4000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CIRULLI, DANIEL, , ,

Mailing Address 4035 NW 43RD ST

City GAINESVILLE State FL Zip Code 32606

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

Name of Employer GAINESVILLE HEALTH & FITNESS Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20290

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CLARK, LAWRENCE, L, DR., SR.

Mailing Address 827 NW 122 TERRACE

City NEWBERRY State FL Zip Code 32669

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20309

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLARY, TINA, , ,

Mailing Address 3609 TRAIL RIDGE ROAD

City MIDDLEBURG State FL Zip Code 32068

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : SA11AI.20109

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLARY, GREGORY, , MR.,
 Mailing Address 3609 TRAILRIDGE RD
 City MIDDLEBURG State FL Zip Code 32068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20273
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
CLEMONS, JANE, , ,
 Mailing Address 12807 SW 1ST PL
 City NEWBERRY State FL Zip Code 32669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE BROKER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20299
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
COLLIER, NATHAN, , ,
 Mailing Address PO BOX 13116
 City GAINESVILLE State FL Zip Code 32604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20368
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSULTANTS AND ANALYSTS, LLC

Mailing Address 7719 NW 18TH LANE

City GAINESVILLE	State FL	Zip Code 32605
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.20345

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
LEVY, GILBERT, , MR., JR.

Mailing Address 7719 NW 18TH LANE

City GAINESVILLE	State FL	Zip Code 32605
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FEC ID number of contributing federal political committee.

Name of Employer CONSULTANTS AND ANALYSTS, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.20409

Amount of Each Receipt this Period

Memo Item

PARTNERSHIP CONSULTANTS AND ANALYSTS, LLC

C. Full Name (Last, First, Middle Initial)
CRANE, LEE, , ,

Mailing Address 4020 NEWBERRY ROAD #400

City GAINESVILLE	State FL	Zip Code 32607
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FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED	Occupation INSURANCE AGENT
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.20314

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="2950.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 12 OF 84
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAWFORD, BRIAN, , ,

Mailing Address 3917 NW 97TH BLVD

City: **GAINESVILLE** State: **FL** Zip Code: **32606**

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

Name of Employer: **INFORMATION REQUESTED** Occupation: **INFORMATION REQUESTED**

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : **SA11AI.20207**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DANIELS, DARRYL, , ,

Mailing Address 1431 SCENIC OAKS DR

City: **ORANGE PARK** State: **FL** Zip Code: **32065**

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

Name of Employer: **CCSO** Occupation: **SHERIFF**

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : **SA11AI.20390**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DARLING, BRIAN, , ,

Mailing Address 4505 N CHELSEA LN

City: **BETHESDA** State: **MD** Zip Code: **20814**

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

Name of Employer: **INFORMATION REQUESTED** Occupation: **INFORMATION REQUESTED**

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : **SA11AI.20351**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVIS, JAMES, A, , JR

Mailing Address 7630 SW COUNTRY ROAD 18

City HAMPTON	State FL	Zip Code 32004
-----------------	-------------	-------------------

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

Name of Employer DAVIS EXPRESS INC.	Occupation OWNER
--	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20360

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DELANEY, PORTER, , ,

Mailing Address 3043 MILITARY RD

City ARLINGTON	State VA	Zip Code 22207
-------------------	-------------	-------------------

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

Name of Employer KYLE HOUSE GROUP	Occupation CONSULTANT
--------------------------------------	--------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2017

Transaction ID : SA11AI.20198

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DICKS, TERRY, , ,

Mailing Address 452 SW CR 240

City LAKE CITY	State FL	Zip Code 32025
-------------------	-------------	-------------------

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

Name of Employer DICKS TRUCKING	Occupation OWNER
------------------------------------	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : SA11AI.20212

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4200.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DRIGGERS, CASSANDRA, , ,

Mailing Address 15713 WEST SR 238

City LAKE BUTLER	State FL	Zip Code 32054
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation LIBERTY TRUCKING
-----------------------------------	--------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : SA11AI.20206

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELRAD, RANDI, K, MS.,

Mailing Address 8015 SW 42ND TEARRACE

City GAINESVILLE	State FL	Zip Code 32608
---------------------	-------------	-------------------

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

Name of Employer CRIME PREVENTION SECURITY SYSTEMS	Occupation OWNER
---	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20327

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FEAGLE, RICHARD, L, MR.,

Mailing Address 13620 SW 89TH AVE.

City ARCHER	State FL	Zip Code 32618
----------------	-------------	-------------------

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

Name of Employer ARCHER AUTOMOTIVE	Occupation OWNER
---------------------------------------	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20330

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4700.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FEAGLE, CECILE, S, ,
Mailing Address 13620 SW 89TH AVE.

City ARCHER	State FL	Zip Code 32618
----------------	-------------	-------------------

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

Name of Employer THE GAINESVILLE SUN	Occupation STAFF ACCOUNTANT
---	--------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20331

Amount of Each Receipt this Period
800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FELD, KENNETH, , MR.,
Mailing Address 9609 HALTER CT

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer FELD ENTERTAINMENT, INC.	Occupation CHAIRMAN & CEO
--	------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2017

Transaction ID : SA11AI.20153

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FERRARA, GINA, , ,
Mailing Address 5007 NW 12TH LN

City GAINESVILLE	State FL	Zip Code 32605
---------------------	-------------	-------------------

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

Name of Employer LIBERTY AIR/HEAT	Occupation OWNER
--------------------------------------	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20377

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRAZIER, LINDA, , ,
Mailing Address 6154 SW 154TH PL

City STARKE State FL Zip Code 32091

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

Name of Employer SCRIBE ASSOCIATES Occupation COURT REPORTER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20358

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GASTON, WILLIAM, , ,
Mailing Address 9691 NW 53RD DR

City GAINESVILLE State FL Zip Code 32653

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

Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20298

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GAY, W., W., ,
Mailing Address 524 STOCKTON STREET

City JACKSONVILLE State FL Zip Code 32204

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

Name of Employer SELF EMPLOYED Occupation CONSTRUCTION

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : SA11AI.20108

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5450.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLEIM, GARRETT, , MR.,
Mailing Address 6826 SW 13TH ST.
City GAINESVILLE State FL Zip Code 32608
FEC ID number of contributing federal political committee. **C**
Name of Employer GLEN PUBLICATIONS Occupation VICE PRESIDENT
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20320
Amount of Each Receipt this Period
1500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
GLEIM, LAWRENCE, A, MR.,
Mailing Address PO BOX 12008
City GAINESVILLE State FL Zip Code 32604
FEC ID number of contributing federal political committee. **C**
Name of Employer GLEM PUBLICATIONS, INC. Occupation VICE PRESIDENT
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20321
Amount of Each Receipt this Period
1500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
GLEIM, IRVIN, , DR.,
Mailing Address PO BOX 12848
City GAINESVILLE State FL Zip Code 32604
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation PHYSICIAN
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20322
Amount of Each Receipt this Period
2500.00
 Memo Item

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

5500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLEIM, LORIE, M., ,
Mailing Address 113 NW 114 WAY

City Gainesville State FL Zip Code 32607

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
09 / 30 / 2017

Transaction ID : SA11AI.20289

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GLEIM, DARLENE, , ,
Mailing Address PO BOX 12848

City Gainesville State FL Zip Code 32604

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2017

Transaction ID : SA11AI.20323

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GODET, YVETTE, M., ,
Mailing Address 10702 SW 27TH AVE

City Gainesville State FL Zip Code 32607

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
09 / 30 / 2017

Transaction ID : SA11AI.20293

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GONZALEZ, RODERICK, F., MR.,
Mailing Address 24514 NW 78TH AVE.

City ALACHUA State FL Zip Code 32616

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

Name of Employer HEALTHCARE RISK MANAGEMENT Occupation BUSINESS ADMINISTRATOR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20305

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GOOD, CLAIR, E., ,
Mailing Address 2221 NW 135TH TER

City GAINESVILLE State FL Zip Code 32606

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20284

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HAZEN, JACK, , ,
Mailing Address 13870 SOUTHWST 175TH AVENUE

City BROOKER State FL Zip Code 32622

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : SA11AI.20214

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENDERSON, JAMES, D., MR., II
 Mailing Address 3611 SW 63RD LANE
 City GAINESVILLE State FL Zip Code 32608
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF EMPLOYED Occupation ENGINEER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20326
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
HENDRY, GAYWARD, , MR.,
 Mailing Address 577 BRANSCOMB RD.
 City GRREN GOVE SPRINGS State FL Zip Code 32043
 FEC ID number of contributing federal political committee. C
 Name of Employer CLAY COUNTY SHERIFFS OFFICE Occupation DEPUTY SHERIFF
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20280
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
HILL, JIM, , ,
 Mailing Address 410 SW 140TH TERR
 City NEWBERRY State FL Zip Code 32669
 FEC ID number of contributing federal political committee. C
 Name of Employer VET COMP & PEN MEDICAL CONSULTING LL Occupation OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2017
Transaction ID : SA11AI.20160
 Amount of Each Receipt this Period
 10000.00
 Memo Item

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

12000.00

**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 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HUTSON, DAVID, W., MR.,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2017	
Mailing Address 3030 HARTLEY RD STE 300			Transaction ID : SA11AI.20199	
City JACKSONVILLE	State FL	Zip Code 62257	Amount of Each Receipt this Period _____ 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer THE HUTSON COMPANIES		Occupation REAL ESTATE INVESTOR		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5400.00		

Full Name (Last, First, Middle Initial) B. HUTSON, DAVID, W., MR.,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2017	
Mailing Address 3030 HARTLEY RD STE 300			Transaction ID : SA11AI.20201	
City JACKSONVILLE	State FL	Zip Code 62257	Amount of Each Receipt this Period _____ 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer THE HUTSON COMPANIES		Occupation REAL ESTATE INVESTOR		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5400.00		

Full Name (Last, First, Middle Initial) C. HUTSON, NANCY, A., MRS.,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2017	
Mailing Address 3030 HARTLEY RD STE 300			Transaction ID : SA11AI.20200	
City JACKSONVILLE	State FL	Zip Code 32257	Amount of Each Receipt this Period _____ 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 4600.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 8100.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUTSON, NANCY, A., MRS.,

Mailing Address 3030 HARTLEY RD
STE 300

City JACKSONVILLE	State FL	Zip Code 32257
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 06 / 2017

Transaction ID : SA11AI.20202

Amount of Each Receipt this Period
1900.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHNS, KENNETH, L, ,

Mailing Address PO BOX 986

City ALACHUA	State FL	Zip Code 32616
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017

Transaction ID : SA11AI.20218

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JONESVILLE PLAZA, LLC

Mailing Address PO BOX 358170

City GAINESVILLE	State FL	Zip Code 32635
---------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20346

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5600.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FERRERO, HORST, , ,

Mailing Address PO BOX 358170

City GAINESVILLE	State FL	Zip Code 32635
---------------------	-------------	-------------------

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

Name of Employer JONESVILLE PLAZA, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20410

Amount of Each Receipt this Period
 _____ 1350.00

Memo Item

PARTNERSHIP JONESVILLE PLAZA, LLC

B. Full Name (Last, First, Middle Initial)
CANNELLA, LUISA, , ,

Mailing Address PO BOX 358170

City GAINESVILLE	State FL	Zip Code 32635
---------------------	-------------	-------------------

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

Name of Employer JONESVILLE PLAZA, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20411

Amount of Each Receipt this Period
 _____ 1350.00

Memo Item

PARTNERSHIP JONESVILLE PLAZA, LLC

C. Full Name (Last, First, Middle Initial)
KAPLAN-STEIN, DALE, , ,

Mailing Address 12801 NORTHWEST 56TH AVENUE

City GAINESVILLE	State FL	Zip Code 32653
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation VETERINARIAN
-----------------------------------	----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20332

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 250.00
TOTAL This Period (last page this line number only).....▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KING, DAVID, A, ,

Mailing Address 959 BIRDWOOD DR

City ORANGE PARK	State FL	Zip Code 32073
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017

Transaction ID : SA11AI.20203

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LANZA, MICHELLE, , MRS.,

Mailing Address 1969 NW 111TH LOOP

City OCALA	State FL	Zip Code 34475
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20308

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LASKEY, CHARLES, , ,

Mailing Address 2352 ST RD 13

City ST. JOHNS	State FL	Zip Code 32259
-------------------	-------------	-------------------

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

Name of Employer NEUROTECH INC.	Occupation VETERINARIAN
------------------------------------	----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20387

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 1000.00
TOTAL This Period (last page this line number only).....▶	_____

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

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

FOR LINE NUMBER: PAGE 25 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEE, DENNIS, , ,
 Mailing Address PO BOX 357845
 City GAINESVILLE State FL Zip Code 32635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20286
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
LEE, CARIDAD, E., ,
 Mailing Address PO BOX 357845
 City GAINESVILLE State FL Zip Code 32635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FLORIDA WOODLAND Occupation OWNER/DEVELOPER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20287
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
LEE, BRITTANY, , ,
 Mailing Address 9330 NW 27TH PL
 City GAINESVILLE State FL Zip Code 32606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation AGRICULTURE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20288
 Amount of Each Receipt this Period
 1500.00
 Memo Item

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

4500.00

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

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

FOR LINE NUMBER: PAGE 26 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEE, ADAM, J., MR.,

Mailing Address 1818 NW 22ND DR

City Gainesville State FL Zip Code 32605

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20285

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEWIS M. GARRISH, DMD, LC

Mailing Address 2441 NW 43RD ST, STE 16

City Gainesville State FL Zip Code 32606

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20335

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GARRISH, LEWIS, , ,

Mailing Address 2441 NORTHWEST 43RD STREET SUITE 16

City Gainesville State FL Zip Code 32606

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

Name of Employer LEWIS M. GARRISH, DMD, LC Occupation DENTIST

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20413

Amount of Each Receipt this Period
250.00

Memo Item

PARTNERSHIP LEWIS M. GARRISH, DMD, LC

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LINGE, JOHN, B, , JR.

Mailing Address 2085 SALT MYRTLE LANE

City FLEMING ISLAND State FL Zip Code 32003

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

Name of Employer SELF EMPLOYED Occupation WEALTH MANAGEMENT

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20270

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LONG, ANDREW, , MR.,

Mailing Address 2822 WINDEMERE CT

City MIDDLEBURG State FL Zip Code 32068

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

Name of Employer PRO TEAM Occupation HOME INSPECTOR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20380

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LYONS, KEVIN, , ,

Mailing Address 8005 A1A S

City ST AUGUSTINE State FL Zip Code 32060

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

Name of Employer MIDFIA HEATING & AIR Occupation CONTRACTOR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20295

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3950.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MACAULAY, ALEXIS, L, MRS.,
Mailing Address 3470 SAINT AUGUSTINE RD

City JACKSONVILLE State FL Zip Code 32207

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

Name of Employer MISTY MORNING HOUNDS Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20378

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCGEHEE, T, R, , JR.
Mailing Address 6222 SAN JOSE BLVD W

City JACKSONVILLE State FL Zip Code 32217

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

Name of Employer MAC PAPERS Occupation EXECUTIVE

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20359

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MCGOWAN, P., TED, ,
Mailing Address POST OFFICE BOX 23295

City JACKSONVILLE State FL Zip Code 32241

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

Name of Employer CLAY COUNTY PORT, INC. Occupation EXECUTIVE DIRECTOR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20268

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCINARNAY, MARCUS, , ,
 Mailing Address 13755 LEON DOPSON RD
 City SANDERSON State FL Zip Code 32087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VALLENCOURT CONSTRUCTION Occupation PRESIDENT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20389
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
MCKNIGHT, SHERRIE, , ,
 Mailing Address 27831 NW 46TH AVE
 City NEWBERRY State FL Zip Code 32669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BIG DADDY ENTERPRISES Occupation SALES
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 675.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20379
 Amount of Each Receipt this Period
 675.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
MILLER, CHRISTINA, , MS.,
 Mailing Address 8505 NW 39TH AVE.
 City GAINESVILLE State FL Zip Code 32606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MMS Occupation PRESIDENT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20324
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

1925.00

**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 30 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MOORE, DOUGLAS, I., MR.,

Mailing Address 634 DYAL ST

City JACKSONVILLE	State FL	Zip Code 32206
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20352

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MOSER, PATRICIA, , MS.,

Mailing Address PO BOX 520

City ALACHUA	State FL	Zip Code 32616
-----------------	-------------	-------------------

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

Name of Employer HORIZON REALTY OF ALACHUA, INC.	Occupation REAL ESTATE BROKER
---	----------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2017

Transaction ID : SA11AI.20196

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MOSLEY, DALE, , ,

Mailing Address POST OFFICE BOX 667

City LAWTEY	State FL	Zip Code 32058
----------------	-------------	-------------------

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

Name of Employer MOSLEY TRUCKING	Occupation OWNER
-------------------------------------	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017

Transaction ID : SA11AI.20209

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MUNSON, LESTER, , ,
 Mailing Address 2013 SWAN TERRACE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BGR GROUP Occupation CONSULTANT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2017
Transaction ID : SA11AI.20110
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
NETTLES, WILLIAM, J, ,
 Mailing Address 190 SW CR 240
 City LAKE CITY State FL Zip Code 32025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NETTLES SAUSAGE Occupation PRESIDENT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017
Transaction ID : SA11AI.20213
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
NEWMAN, BOBBY, , ,
 Mailing Address 2701 N 16TH ST
 City TAMPA State FL Zip Code 33605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer J.C. NEWMAN CIGAR CO. Occupation EXECUTIVE VICE PRESIDENT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2017
Transaction ID : SA11AI.20158
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 32 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEWSOM, LAURIE, K., MRS.,
Mailing Address 2521 NW 41ST ST.

City Gainesville State FL Zip Code 32606

FEC ID number of contributing federal political committee. C

Name of Employer EYE SURGICENTER Occupation ADMINISTRATOR
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20341

Amount of Each Receipt this Period
1000.00

 Memo Item

B. Full Name (Last, First, Middle Initial)
NIBLETT, DAVID, ALLEN, ,
Mailing Address 1320 SW 104TH ST

City Gainesville State FL Zip Code 32607

FEC ID number of contributing federal political committee. C

Name of Employer UF Occupation SCIENTIST
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20311

Amount of Each Receipt this Period
250.00

 Memo Item

C. Full Name (Last, First, Middle Initial)
O'STEEN, DEXTER, A, ,
Mailing Address 16707 NW COUNTRY ROAD

City Alachua State FL Zip Code 32615

FEC ID number of contributing federal political committee. C

Name of Employer O'STEEN BROS CONSTRUCTION Occupation OWNER
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2017
Transaction ID : SA11AI.20217

Amount of Each Receipt this Period
1000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PARKS, STEPHEN, R, ,

Mailing Address 1857 ALAQUA DR.

City LONGWOOD	State FL	Zip Code 32779
------------------	-------------	-------------------

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

Name of Employer PARKS FORD	Occupation PRESIDENT
--------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20301

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PASTORE, JOHN, A., , JR.

Mailing Address 8015 SOUTHWEST 42ND TERRACE

City GAINESVILLE	State FL	Zip Code 32607
---------------------	-------------	-------------------

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

Name of Employer CRIME PREVENTION SYSTEMS	Occupation OWNER
--	---------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20328

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
POWELL, RODGER, D, ,

Mailing Address 3426 SE CR 21B

City KEYSTONE HEIGHTS	State FL	Zip Code 32656
--------------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20303

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POWELL, KATIE, , ,
 Mailing Address 3426 SE CR218
 City KEYSTONE HEIGHTS State FL Zip Code 32656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20304
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
PRINCE, TAMMY, , ,
 Mailing Address 1522 SOUTHWEST 112TH STREET
 City GAINESVILLE State FL Zip Code 32607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REGISTERED NURSE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20316
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
PRITCHETT, PHILLIP, W., MR.,
 Mailing Address PO BOX 311
 City LAKE BUTLER State FL Zip Code 32054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRITCHETT TRUCKING Occupation OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017
Transaction ID : SA11AI.20215
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

5500.00

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

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

FOR LINE NUMBER: PAGE 35 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRITCHETT, JON, W., MR.,
Mailing Address PO BOX 311

City LAKE BUTER State FL Zip Code 32054

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

Name of Employer PRITCHETT TRUCKING Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017

Transaction ID : SA11AI.20208

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RIZER, ALBERT, G, ,
Mailing Address 586 GOLDEN LINKS DR.

City ORANGE PARK State FL Zip Code 32073

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

Name of Employer HAVEN HOSPICE Occupation ADMINISTRATOR

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20265

Amount of Each Receipt this Period
 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERTS, AVERY, C., MR.,
Mailing Address POST OFFICE BOX 233

City LAKE BUTLER State FL Zip Code 32054

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

Name of Employer SWIFT CREEK REALTY Occupation OWNER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017

Transaction ID : SA11AI.20216

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RODRIGUEZ, OSCAR, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2017	
Mailing Address 5214 SW 1ST TER, STE A			Transaction ID : SA11AI.20349	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Receipt this Period _____, _____, _____ 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer O.R. PROPERTIES LLC		Occupation OWNER		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____, _____, _____ 250.00		

Full Name (Last, First, Middle Initial) B. SANCHEZ, HERMAN, , , JR.			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2017	
Mailing Address 479 NORTHEAST 446TH STREET			Transaction ID : SA11AI.20336	
City OLD TOWN	State FL	Zip Code 32680	Amount of Each Receipt this Period _____, _____, _____ 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer SELF EMPLOYED		Occupation FARMER		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____, _____, _____ 3750.00		

Full Name (Last, First, Middle Initial) C. SANCHEZ, HERMAN, , , JR.			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2017	
Mailing Address 479 NORTHEAST 446TH STREET			Transaction ID : SA11AI.20337	
City OLD TOWN	State FL	Zip Code 32680	Amount of Each Receipt this Period _____, _____, _____ 1050.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer SELF EMPLOYED		Occupation FARMER		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____, _____, _____ 3750.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____, _____, _____ 4000.00
TOTAL This Period (last page this line number only)..... ▶	_____, _____, _____

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

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

FOR LINE NUMBER: PAGE 37 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SANCHEZ, VIRGINIA, , ,
 Mailing Address 479 NE 446TH ST
 City OLD TOWN State FL Zip Code 32680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SANCHEZ FARMS, LLC Occupation PARTNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20338
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
SANCHEZ, VIRGINIA, , ,
 Mailing Address 479 NE 446TH ST
 City OLD TOWN State FL Zip Code 32680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SANCHEZ FARMS, LLC Occupation PARTNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20339
 Amount of Each Receipt this Period
 1050.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SAPP, DEMPSEY, R., MR., JR.
 Mailing Address 18796 SW 132ND AVE.
 City LAKE BUTLER State FL Zip Code 32054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FLORIDA PEST CONTROL Occupation OWNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2017
Transaction ID : SA11AI.20204
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

4750.00

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

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

FOR LINE NUMBER: PAGE 38 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCARBOROUGH, RICHARD, , MR.,

Mailing Address 2811 NW 41ST ST.

City GAINESVILLE	State FL	Zip Code 32606
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation INSURANCE
-----------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20297

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHNEIDER, GARY, , ,

Mailing Address 4437 SW 91ST DR

City GAINESVILLE	State FL	Zip Code 32608
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20319

Amount of Each Receipt this Period
300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SCORPIO, HOLLY, , ,

Mailing Address 4400 NW 122ND ST

City GAINESVILLE	State FL	Zip Code 32606
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CONSTRUCTION MANAGER
-----------------------------------	------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20306

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

3300.00

**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 39 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SELF, GREGORY, , ,

Mailing Address 2025 NW 24TH ST

City GAINESVILLE	State FL	Zip Code 32605
---------------------	-------------	-------------------

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

Name of Employer TERRA-COM ENVIRONMENTAL CONSULTING	Occupation GEOLOGIST
--	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20362

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHAW, MICHAEL, , ,

Mailing Address PO BOX 357

City MAYO	State FL	Zip Code 32066
--------------	-------------	-------------------

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

Name of Employer MAYO FERTILIZER	Occupation AGRIBUSINESS
-------------------------------------	----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20334

Amount of Each Receipt this Period
2300.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHAW, FREDA, , ,

Mailing Address PO BOX 357

City MAYO	State FL	Zip Code 32066
--------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation AGRI BUSINESS
-----------------------------------	-----------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20333

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHORE, FRED, , ,

Mailing Address 13410 NORTHWEST 49TH LANE

City Gainesville State FL Zip Code 32606

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation VETERINARIAN

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20307

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHORE BUILDERS INC.

Mailing Address 5200 W NEWBERRY RD, STE D-4

City Gainesville State FL Zip Code 32607

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20342

Amount of Each Receipt this Period
250.00

Memo Item
REFUND PENDING

C. Full Name (Last, First, Middle Initial)
SMITH, MICHAEL, , ,

Mailing Address 785 CREIGHTON RD

City Fleming Island State FL Zip Code 32003

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation DENTIST

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20392

Amount of Each Receipt this Period
250.00

Memo Item

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

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

3000.00

**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 41 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STASCO, GARY, W, MR.,

Mailing Address PO BOX 1384

City ORANGE PARK	State FL	Zip Code 32067
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20266

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STOROE, WILLIAM, , ,

Mailing Address 1206 NW 150TH DR.

City NEWBERRY	State FL	Zip Code 32669
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation DENTIST
-----------------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20300

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STREETER, JACKSON, , ,

Mailing Address 2714 SW 106TH ST

City GAINESVILLE	State FL	Zip Code 32608
---------------------	-------------	-------------------

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

Name of Employer FLORIDA INSTITUTE	Occupation EXECUTIVE
---------------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20312

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3200.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STREETER, JACKSON, , ,
 Mailing Address 2714 SW 106TH ST
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 FLORIDA INSTITUTE EXECUTIVE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20313
 Amount of Each Receipt this Period
 2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
SULLIVAN, NANCY, , ,
 Mailing Address 20638 NORTHWEST 78TH AVENUE
 City Alachua State FL Zip Code 32615
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 SELF EMPLOYED REAL ESTATE
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20296
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SUTLIFF, RICHARD, C, DR.,
 Mailing Address 2387 COLLEEN LN
 City Fleming Island State FL Zip Code 32003
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20264
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

3200.00

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

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

FOR LINE NUMBER: PAGE 43 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE GREEN HOUSE NURSERY & GARDEN SUPPLY, LLC
 Mailing Address 15207 W NEWBERRY RD
 City NEWBERRY State FL Zip Code 32669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20350
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
GREEN, JUSTIN, , ,
 Mailing Address 15207 W NEWBERRY RD
 City NEWBERRY State FL Zip Code 32669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
THE GREEN HOUSE NURSERY & GARDEN S PARTNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20412
 Amount of Each Receipt this Period
 250.00
 Memo Item
PARTNERSHIP THE GREEN HOUSE NURSERY & GARDEN SUPPLY, LLC

C. Full Name (Last, First, Middle Initial)
TILLIS, MURRAY, , ,
 Mailing Address PO BOX 1669
 City CHIEFLAND State FL Zip Code 32644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
TILLIS FARMS, LLC PARTNER
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017
Transaction ID : SA11AI.20340
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 44 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOMLINSON, CHRISTOPHER, R, MR,
Mailing Address 516 KEVIN DR
City ORANGE PARK State FL Zip Code 32073
FEC ID number of contributing federal political committee. C
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED
Receipt For: 2018
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20277
Amount of Each Receipt this Period
250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
TURNAGE, ROBERT, , ,
Mailing Address 2820 WINDEMERE COURT
City MIDDLEBURG State FL Zip Code 32068
FEC ID number of contributing federal political committee. C
Name of Employer ISLANDS MECHANICAL Occupation PRESIDENT
Receipt For: 2018
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20383
Amount of Each Receipt this Period
2700.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
TURNAGE, ROBERT, , ,
Mailing Address 2820 WINDEMERE COURT
City MIDDLEBURG State FL Zip Code 32068
FEC ID number of contributing federal political committee. C
Name of Employer ISLANDS MECHANICAL Occupation PRESIDENT
Receipt For: 2018
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20384
Amount of Each Receipt this Period
2700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5650.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 84	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TURNAGE, KAREN, G., MRS.,

Mailing Address 2820 WINDEMERE CT

City MIDDLEBURG	State FL	Zip Code 32068
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20381

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TURNAGE, KAREN, G., MRS.,

Mailing Address 2820 WINDEMERE CT

City MIDDLEBURG	State FL	Zip Code 32068
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20382

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TURNAGE, SEAN, P., ,

Mailing Address 2804 WINDEMERE CT

City MIDDLEBURGH	State FL	Zip Code 32068
---------------------	-------------	-------------------

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

Name of Employer ISLAND MECHANICAL INC.	Occupation CEO
--	-------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20386

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8100.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 46 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
URIBE, KENNETH, , ,

Mailing Address 2124 SW 102ND TER

City GAINESVILLE State FL Zip Code 32607

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20353

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
URIBE, GINA, G., MRS.,

Mailing Address 2124 SW 102ND TER

City GAINESVILLE State FL Zip Code 32607

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20354

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VALLENCOURT, KATHRYN, J, MRS.,

Mailing Address 2729 HOLLY POINT RD E

City ORANGE PARK State FL Zip Code 32073

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

Name of Employer VALLENCOURT CONTRUCTION Occupation CHAIR MEMBER

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20272

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

7900.00

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

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

FOR LINE NUMBER: PAGE 47 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEINGART, BRECK, A, MR.,
Mailing Address 8400 SW 24TH AVE.
City GAINESVILLE State FL Zip Code 32607
FEC ID number of contributing federal political committee. **C**
Name of Employer CPPI Occupation GENERAL CONTRACTOR
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20366
Amount of Each Receipt this Period
2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
WEINGART, BRECK, A, MR.,
Mailing Address 8400 SW 24TH AVE.
City GAINESVILLE State FL Zip Code 32607
FEC ID number of contributing federal political committee. **C**
Name of Employer CPPI Occupation GENERAL CONTRACTOR
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017
Transaction ID : SA11AI.20367
Amount of Each Receipt this Period
2300.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
WERNER, SANDRA, , ,
Mailing Address 16901 NORTHWEST 78TH AVENUE
City ALACHUA State FL Zip Code 32615
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: 2018
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2017
Transaction ID : SA11AI.20154
Amount of Each Receipt this Period
500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 48 OF 84
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WERNER, TONIA, , DR.,

Mailing Address 16903 NORTHWEST 78TH AVENUE

City ALACHUA	State FL	Zip Code 32615
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2017

Transaction ID : SA11AI.20155

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WIECHMANN, BRET, N., ,

Mailing Address 4405 NW 9TH PL

City GAINESVILLE	State FL	Zip Code 32605
---------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20281

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WIGGINS, MASON, E., ,

Mailing Address 3780 CREEK HOLLOW LN.

City MIDDLEBURG	State FL	Zip Code 32068
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11AI.20278

Amount of Each Receipt this Period
250.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 49 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILCOX, NANCY, K., ,

Mailing Address 2324 SE CR21-B

City MELROSE State FL Zip Code 32666

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11AI.20294

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	177325.00

**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 50 OF 84
<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)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 14 / 2017

Transaction ID : SA11C.20164

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 550 SOUTH TRYON STREET

City CHARLOTTE	State NC	Zip Code 28202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20257

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FLORIDA MUNICIPAL ELECTRIC ASSOCIATION INC PAC FMEA PAC

Mailing Address 417 EAST COLLEGE AVENUE

City TALLAHASSEE	State FL	Zip Code 32301
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00377754

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20256

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 84	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 11 / 2017

Transaction ID : SA11C.20157

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREENBERG TRAUIG, P.A. PAC

Mailing Address 54 STATE STREET
6TH FLOOR

City ALBANY	State NY	Zip Code 12207
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2017

Transaction ID : SA11C.20163

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11C.20258

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ , _____ , _____ 3000.00
TOTAL This Period (last page this line number only).....▶	_____ , _____ , _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 84	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LIVESTOCK MARKETING ASSOCIATION POLITICAL ACTION COMMITTEE (LMA-PAC)

Mailing Address 10510 NW AMBASSADOR DRIVE

City KANSAS CITY	State MO	Zip Code 64153
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00244400

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11C.20259

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2017

Transaction ID : SA11C.20165

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOC. PAC (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City CENTENNIAL	State CO	Zip Code 80112
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2017

Transaction ID : SA11C.20254

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 7000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 84	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOC. PAC (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City CENTENNIAL	State CO	Zip Code 80112
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20255

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SEED FIRST POLITICAL ACTION COMMITTEE

Mailing Address 300 INDEPENDENCE AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00578468

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20252

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE KROGER CO. POLITICAL ACTION COMMITTEE

Mailing Address 1014 VINE STREET

City CINCINNATI	State OH	Zip Code 45202
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00059238

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20251

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 54 OF 84	
<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)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VALENT U.S.A. LLC PAC

Mailing Address 300 INDEPENDENCE AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00650986

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2017

Transaction ID : SA11C.20253

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	21500.00

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

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

FOR LINE NUMBER: PAGE 55 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PIRYX, INC.

Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2017

Transaction ID : SA14.20394

Amount of Each Receipt this Period
 430.00

Memo Item
REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	430.00
TOTAL This Period (last page this line number only).....▶	430.00

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 56 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C	
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 682.35	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20121	
Candidate Name		Memo Item <input type="checkbox"/>		
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) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address PO BOX 619616			FEC Identification Number C	
City DFW AIRPORT	State TX	Zip Code 75261	Amount of Each Disbursement this Period 415.60	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.20122	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. UBER CAB			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address 182 HOWARD ST			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 31.27	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20123	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	682.35
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 57 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address 300 FIRST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 235.48	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.20124	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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) B. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017	
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C	
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 404.10	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20166	
Candidate Name			<input type="checkbox"/> Memo Item	
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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017	
Mailing Address PO BOX 619616			FEC Identification Number C	
City DFW AIRPORT	State TX	Zip Code 75261	Amount of Each Disbursement this Period 145.30	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.20167	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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).....▶	404.10
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 58 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017		
Mailing Address POST OFFICE BOX 20980 DEPT. 980			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30320	Amount of Each Disbursement this Period 258.80		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.20168		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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) B. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C		
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 528.35		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20223		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017		
Mailing Address 300 FIRST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 126.74		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.20224		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	528.35
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 59 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2017	
Mailing Address PO BOX 619616			FEC Identification Number C	
City DFW AIRPORT	State TX	Zip Code 75261	Amount of Each Disbursement this Period 401.61	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : SB17.20225	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address POST OFFICE BOX 15153			FEC Identification Number C	
City WILMINGTON	State DE	Zip Code 19886	Amount of Each Disbursement this Period 1648.84	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20125	
Candidate Name		Memo Item <input type="checkbox"/>		
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. CIRCLE K			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address 12911 N TELECOM PKWY			FEC Identification Number C	
City TEMPLE TERRACE	State FL	Zip Code 33637	Amount of Each Disbursement this Period 46.49	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20126	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	1648.84
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 60 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EXXON/MOBIL		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017
Mailing Address 3424 SOUTHWEST WILLISTON ROAD		FEC Identification Number C
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 80.85
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.20127	

Full Name (Last, First, Middle Initial) B. OCEAN PRIME		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017
Mailing Address 1341 G ST NW, STE 1		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 350.48
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.20128	

Full Name (Last, First, Middle Initial) C. RUTH'S CHRIS STEAKHOUSE		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017
Mailing Address 724 9TH ST NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 233.80
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:	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.20129	

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 61 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address POST OFFICE BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348	Amount of Each Disbursement this Period 85.15	
Purpose of Disbursement CAMPAIGN CELL PHONE		Category/ Type 001	Transaction ID : SB17.20133	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. SHELL			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address 910 LOUISIANA ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77002	Amount of Each Disbursement this Period 18.26	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20134	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. PUBLIX SUPERMARKETS, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address 5801 SOUTHWEST 75TH STREET			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 98.00	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : SB17.20136	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 62 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address 1601 TRAPELO RD			FEC Identification Number C	
City WALTHAM	State MA	Zip Code 02451	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement E-MARKETING		Category/ Type 001	Transaction ID : SB17.20137	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. WUFOO.COM			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address 101 LYTTON AVE			FEC Identification Number C	
City PALO ALTO	State CA	Zip Code 94301	Amount of Each Disbursement this Period 29.95	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.20139	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. US HOUSE OF REPRESENTATIVES GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017	
Mailing Address LONGWORTH BUILDING			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20515	Amount of Each Disbursement this Period 104.40	
Purpose of Disbursement HOST GIFT-DECANTER		Category/ Type 001	Transaction ID : SB17.20140	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 63 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WIX.COM			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017		
Mailing Address PO BOX 40190			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94140	Amount of Each Disbursement this Period 111.00		
Purpose of Disbursement DOMAIN REGISTRATION		Category/ Type 001	Transaction ID : SB17.20142		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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) B. UPS STORE			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017		
Mailing Address 5745 SOUTHWEST 75TH STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 12.78		
Purpose of Disbursement SHIPPING		Category/ Type 001	Transaction ID : SB17.20144		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017		
Mailing Address POST OFFICE BOX 15153			FEC Identification Number C		
City WILMINGTON	State DE	Zip Code 19886	Amount of Each Disbursement this Period 3056.86		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20179		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	3056.86
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 64 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 910 LOUISIANA ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77002	Amount of Each Disbursement this Period 71.39	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20180	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. GODADDY.COM			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 375 COLLINS ROAD NORTHEAST			FEC Identification Number C	
City CEDAR RAPIDS	State IA	Zip Code 52402	Amount of Each Disbursement this Period 777.95	
Purpose of Disbursement WEB HOSTING		Category/ Type 001	Transaction ID : SB17.20181	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. GOOGLE, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address ONLINE			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94035	Amount of Each Disbursement this Period 493.62	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.20183	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 65 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CATO INSTITUTE		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017
Mailing Address 1000 MASSACHUSETTS AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement EVENT SUPPLIES		001
Candidate Name		Amount of Each Disbursement this Period 538.00
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) ▼	Transaction ID : SB17.20184
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FACEBOOK		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017
Mailing Address 156 UNIVERSITY AVE		FEC Identification Number C
City PALO ALTO	State CA	Zip Code 94301
Purpose of Disbursement ADVERTISING		001
Candidate Name		Amount of Each Disbursement this Period 50.00
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) ▼	Transaction ID : SB17.20185
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017
Mailing Address POST OFFICE BOX 105378		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30348
Purpose of Disbursement CAMPAIGN CELL PHONE		001
Candidate Name		Amount of Each Disbursement this Period 103.50
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) ▼	Transaction ID : SB17.20187
State: District:		<input checked="" type="checkbox"/> Memo Item

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 66 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PUBLIX SUPERMARKETS, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 5801 SOUTHWEST 75TH STREET			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 188.91	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.20189	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 1601 TRAPELO RD			FEC Identification Number C	
City WALTHAM	State MA	Zip Code 02451	Amount of Each Disbursement this Period 85.00	
Purpose of Disbursement E-MARKETING		Category/ Type 001	Transaction ID : SB17.20190	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. COSTA VIDA			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 3581 SW ARCHER RD			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 430.81	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.20191	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 67 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WUFOO.COM			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 101 LYTTON AVE			FEC Identification Number C	
City PALO ALTO	State CA	Zip Code 94301	Amount of Each Disbursement this Period 29.95	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.20192	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. EXXON/MOBIL			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2017	
Mailing Address 3424 SOUTHWEST WILLISTON ROAD			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 34.41	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20194	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017	
Mailing Address POST OFFICE BOX 15153			FEC Identification Number C	
City WILMINGTON	State DE	Zip Code 19886	Amount of Each Disbursement this Period 1683.98	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.20227	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1683.98
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 68 OF 84	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CANVA		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017
Mailing Address 2/2 LACEY ST SURRY HILLS, NSW 2010 AUSTRALIA		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement E-MARKETING		001
Candidate Name		Category/ Type
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) ▼	Amount of Each Disbursement this Period 200.40
State: District:		Transaction ID : SB17.20232 <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017
Mailing Address POST OFFICE BOX 105378		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement CAMPAIGN CELL PHONE		001
Candidate Name		Category/ Type
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) ▼	Amount of Each Disbursement this Period 90.01
State: District:		Transaction ID : SB17.20235 <input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. THE MONOCLE		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017
Mailing Address 107 D ST NE		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement EVENT CATERING		001
Candidate Name		Category/ Type
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) ▼	Amount of Each Disbursement this Period 712.22
State: District:		Transaction ID : SB17.20237 <input checked="" type="checkbox"/> Memo Item

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 69 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WHOLE FOODS MARKET			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017		
Mailing Address 1440 P ST NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Disbursement this Period 122.98		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.20239		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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) B. CIRCLE K			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017		
Mailing Address 12911 N TELECOM PKWY			FEC Identification Number C		
City TEMPLE TERRACE	State FL	Zip Code 33637	Amount of Each Disbursement this Period 19.83		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.20241		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. FACEBOOK			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017		
Mailing Address 156 UNIVERSITY AVE			FEC Identification Number C		
City PALO ALTO	State CA	Zip Code 94301	Amount of Each Disbursement this Period 125.00		
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.20242		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	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 70 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOOGLE, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017	
Mailing Address ONLINE			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94035	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.20243	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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) B. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2017	
Mailing Address 1601 TRAPELO RD			FEC Identification Number C	
City WALTHAM	State MA	Zip Code 02451	Amount of Each Disbursement this Period 95.00	
Purpose of Disbursement E-MARKETING		Category/ Type 001	Transaction ID : SB17.20246	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. ELECTEK			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address PO BOX 23715			FEC Identification Number C	
City CHAGRIN FALLS	State OH	Zip Code 44023	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.20113	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	500.00
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 71 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEK			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017		
Mailing Address PO BOX 23715			FEC Identification Number C		
City CHAGRIN FALLS	State OH	Zip Code 44023	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.20169		
Candidate Name		<input type="checkbox"/> Memo Item			
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) B. ELECTEK			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017		
Mailing Address PO BOX 23715			FEC Identification Number C		
City CHAGRIN FALLS	State OH	Zip Code 44023	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.20222		
Candidate Name		<input type="checkbox"/> Memo Item			
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. GRIT STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2017		
Mailing Address 12391 NE 91ST CT			FEC Identification Number C		
City ARCHER	State FL	Zip Code 32618	Amount of Each Disbursement this Period 10394.60		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : SB17.20120		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	11394.60
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 72 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2017		
Mailing Address 2201 N MAIN ST			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 595.59		
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.20119		
Candidate Name		<input type="checkbox"/> Memo Item			
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) B. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2017		
Mailing Address 2201 N MAIN ST			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 595.59		
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.20175		
Candidate Name		<input type="checkbox"/> Memo Item			
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. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2017		
Mailing Address 2201 N MAIN ST			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 595.59		
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.20226		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1786.77
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 73 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2017	
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 43.00	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20111	
Candidate Name		<input type="checkbox"/> Memo Item		
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) B. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2017	
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 4.30	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20151	
Candidate Name		<input type="checkbox"/> Memo Item		
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. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2017	
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 10.75	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20159	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	58.05
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 74 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2017		
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 430.00		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20162		
Candidate Name		<input type="checkbox"/> Memo Item			
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) B. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2017		
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 57.42		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20228		
Candidate Name		<input type="checkbox"/> Memo Item			
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. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2017		
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 21.50		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20197		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	508.92
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 75 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017		
Mailing Address 144 SECOND STREET FIRST FLOOR			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 1767.75		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : SB17.20393		
Candidate Name		<input type="checkbox"/> Memo Item			
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) B. PLANTATION HALL			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2017		
Mailing Address 5100 SW 91ST TERR			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 750.00		
Purpose of Disbursement EVENT FACILITY RENTAL		Category/ Type 001	Transaction ID : SB17.20249		
Candidate Name		<input type="checkbox"/> Memo Item			
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. PRINCE WILLIAM MARINA			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2017		
Mailing Address 12849 GORDON BLVD			FEC Identification Number C		
City WOODBIDGE	State VA	Zip Code 22192	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement EVENT FACILITY RENTAL		Category/ Type 001	Transaction ID : SB17.20173		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	3017.75
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 76 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 1500.46	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.20112	
Candidate Name		<input type="checkbox"/> Memo Item		
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) B. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 1501.84	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.20219	
Candidate Name		<input type="checkbox"/> Memo Item		
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. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 1500.46	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.20221	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	4502.76
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 77 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRATEGIC MAINTENANCE SOLUTIONS INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2017	
Mailing Address 2495 CR 722			FEC Identification Number C	
City WEBSTER	State FL	Zip Code 33597	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement SIGN REMOVAL		Category/ Type 001	Transaction ID : SB17.20114	
Candidate Name		<input type="checkbox"/> Memo Item		
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) B. SUNTRUST BANK			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2017	
Mailing Address 5303 SOUTHWEST 91ST DRIVE			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.20146	
Candidate Name		<input type="checkbox"/> Memo Item		
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. SUNTRUST BANK			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2017	
Mailing Address 5303 SOUTHWEST 91ST DRIVE			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.20396	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	200.00
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 78 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2017
Mailing Address 5303 SOUTHWEST 91ST DRIVE		FEC Identification Number C
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 50.00
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:	Transaction ID : SB17.20395 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2017
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL(SEE MEMO)	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 320.00
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:	Transaction ID : SB17.20115 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2017
Mailing Address 6470 SOUTHEAST 60TH AVENUE		FEC Identification Number C
City TRENTON	State FL	Zip Code 32693
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 320.00
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:	Transaction ID : SB17.20116 <input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	370.00
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 79 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 26.72	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.20117	
Candidate Name		<input type="checkbox"/> Memo Item		
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) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 180.00	
Purpose of Disbursement PAYROLL(SEE MEMO)		Category/ Type 001	Transaction ID : SB17.20148	
Candidate Name		<input type="checkbox"/> Memo Item		
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. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017	
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C	
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 180.00	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.20149	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	206.72
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 80 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100				
City GLENVIEW	State IL	Zip Code 60025	FEC Identification Number C	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Amount of Each Disbursement this Period 15.03	
Candidate Name		Transaction ID : SB17.20150		
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) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100				
City GLENVIEW	State IL	Zip Code 60025	FEC Identification Number C	
Purpose of Disbursement PAYROLL(SEE MEMO)		Category/ Type 001	Amount of Each Disbursement this Period 200.00	
Candidate Name		Transaction ID : SB17.20170		
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) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2017	
Mailing Address 6470 SOUTHEAST 60TH AVENUE				
City TRENTON	State FL	Zip Code 32693	FEC Identification Number C	
Purpose of Disbursement SALARY		Category/ Type 001	Amount of Each Disbursement this Period 200.00	
Candidate Name		Transaction ID : SB17.20171		
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) ▼		<input checked="" type="checkbox"/> Memo Item	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	215.03
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 81 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 16.70		
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.20172		
Candidate Name		<input type="checkbox"/> Memo Item			
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) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 120.00		
Purpose of Disbursement PAYROLL(SEE MEMO)		Category/ Type 001	Transaction ID : SB17.20176		
Candidate Name		<input type="checkbox"/> Memo Item			
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. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2017		
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C		
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 120.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.20177		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	136.70
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 82 OF 84	
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 10.02	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.20178	
Candidate Name		<input type="checkbox"/> Memo Item		
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) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 320.00	
Purpose of Disbursement PAYROLL(SEE MEMO)		Category/ Type 001	Transaction ID : SB17.20229	
Candidate Name		<input type="checkbox"/> Memo Item		
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. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2017	
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C	
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 320.00	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.20230	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	330.02
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 83 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2017
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL EXPENSES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 26.72
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	26.72
TOTAL This Period (last page this line number only).....▶	31258.52

**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 84 OF 84			
	<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)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HILL, JIM, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2017		
Mailing Address 410 SW 140TH TERR			FEC Identification Number C		
City NEWBERRY	State FL	Zip Code 32669	Amount of Each Disbursement this Period 10000.00		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : SB20A.20220		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SHORE BUILDERS INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2017		
Mailing Address 5200 W NEWBERRY RD, STE D-4			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32607	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : SB20A.20397		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
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).....▶	10250.00
TOTAL This Period (last page this line number only).....▶	10250.00