

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

Mike Ross for Congress Committee

ADDRESS (number and street) ▼

PO Box 360

Check if different than previously reported. (ACC)

Prescott

AR

71857

2. **FEC IDENTIFICATION NUMBER** ▼

C C00345710

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

AR

04

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

/  /

through

/  /

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

Type or Print Name of Treasurer Vickie Winpisinger

Signature of Treasurer Vickie Winpisinger

[Electronically Filed]

Date

/  /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 18

Write or Type Committee Name

**Mike Ross for Congress Committee**

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))....	0.00	469337.78
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	114654.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	354683.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5499.21	438639.37
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8077.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5499.21	430561.77
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

**Mike Ross for Congress Committee**

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election)  through <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="0.00"/>	<input type="text" value="86600.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="0.00"/>	<input type="text" value="14019.00"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="0.00"/>	<input type="text" value="100619.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="368718.78"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 18

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
0.00	469337.78	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	8077.60	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
1.67	432.76	0.53
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
1.67	477848.14	0.53

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 18

Write or Type Committee Name

Mike Ross for Congress Committee

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

**II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="5499.21"/>	<input type="text" value="438639.37"/>	<input type="text" value="2098.16"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="86154.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 18

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	28500.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	114654.00	0.00
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**21. OTHER DISBURSEMENTS**

5154.71	88817.28	1059.71
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

10653.92	642110.65	3157.87
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

0.00	354683.78	0.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

5499.21	430561.77	2098.16
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10652.25
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	1.67
25. SUBTOTAL (add Line 23 and Line 24).....	10653.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10653.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bank of Prescott**

Mailing Address PO Box 490

City: Prescott State: AR Zip Code: 71857

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

Name of Employer: Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 432.76

Date of Receipt: 10 / 31 / 2012

**Transaction ID : C7837778**

Amount of Each Receipt this Period: 1.14

\* Interest income

**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:

Amount of Each Receipt this Period:

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

Mailing Address

City: State: Zip Code:

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

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date:

Date of Receipt:

Amount of Each Receipt this Period:

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

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

1.14

1.14

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Clark County Branch NAACP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address PO Box 304		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D512369</b>
City Arkadelphia	State AR	
Zip Code 71923	Purpose of Disbursement Event tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mark Heinitz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 6433 Burwell Street		Amount of Each Disbursement this Period 195.00 <b>Transaction ID : D512396</b>
City Springfield	State VA	
Zip Code 22150	Purpose of Disbursement Accounting services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D512400</b>
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Building assessments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	305.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Nevada County Picayune</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 60		Amount of Each Disbursement this Period 465.00 <b>Transaction ID : D512403</b>
City Prescott	State AR	
Zip Code 71857	Purpose of Disbursement Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Rocklands Barbeque &amp; Grilling Company</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 25 S. Quaker Lane Suite 11		Amount of Each Disbursement this Period 477.15 <b>Transaction ID : D512397</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Blue Dog event catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Visa Credit Card Operations</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address PO Box 22116		Amount of Each Disbursement this Period 151.43 <b>Transaction ID : D512398</b>
City Tulsa	State OK	
Zip Code 74121-2116	Purpose of Disbursement Credit card (see below if itemized)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1093.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Winpisinger &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 6.75
City Gaithersburg	State MD	
Zip Code 20878	Purpose of Disbursement Postage	Transaction ID : D512401
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Visa Credit Card Operations</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address PO Box 22116		Amount of Each Disbursement this Period 3301.05
City Tulsa	State OK	
Zip Code 74121-2116	Purpose of Disbursement Credit card (see below if itemized)	Transaction ID : D512372
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capital Grille - Charlotte</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 201 North Tryon Street		Amount of Each Disbursement this Period 347.53
City Charlotte	State NC	
Zip Code 28202	Purpose of Disbursement Business meal at Democratic Convention	Transaction ID : D512385
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3307.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. GK Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address PO Box 1450		Amount of Each Disbursement this Period 172.79
City Bryan	State TX	
Zip Code 77806	Purpose of Disbursement Website expense	Transaction ID : D512386
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hampton Inn Suites - Charlotte</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 9110 Southern Pine Blvd.		Amount of Each Disbursement this Period 8.00
City Charlotte	State NC	
Zip Code 28273	Purpose of Disbursement Travel/Lodging - Democratic Convention	Transaction ID : D512379
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hampton Inn Suites - Charlotte</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 9110 Southern Pine Blvd.		Amount of Each Disbursement this Period 532.47
City Charlotte	State NC	
Zip Code 28273	Purpose of Disbursement Travel/Lodging - Democratic Convention	Transaction ID : D512374
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Hampton Inn Suites - Charlotte</b>		Date of Disbursement
Mailing Address 9110 Southern Pine Blvd.		M M / D D / Y Y Y Y 10 / 09 / 2012
City Charlotte	State NC	Zip Code 28273
Purpose of Disbursement Travel/Lodging - Democratic Convention	Category/ Type	Amount of Each Disbursement this Period 532.47
Candidate Name		<b>Transaction ID : D512375</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hampton Inn Suites - Charlotte</b>		Date of Disbursement
Mailing Address 9110 Southern Pine Blvd.		M M / D D / Y Y Y Y 10 / 09 / 2012
City Charlotte	State NC	Zip Code 28273
Purpose of Disbursement Travel/Lodging - Democratic Convention	Category/ Type	Amount of Each Disbursement this Period 532.47
Candidate Name		<b>Transaction ID : D512376</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement
Mailing Address 3301 Jefferson Davis Highway		M M / D D / Y Y Y Y 10 / 09 / 2012
City Alexandria	State VA	Zip Code 22305
Purpose of Disbursement Office supplies	Category/ Type	Amount of Each Disbursement this Period 89.44
Candidate Name		<b>Transaction ID : D512387</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

**A. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Travel/Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 09 / 2012

Amount of Each Disbursement this Period: 25.00

Transaction ID : D512377

[MEMO ITEM]

**B. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E. Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Travel/Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 09 / 2012

Amount of Each Disbursement this Period: 150.00

Transaction ID : D512378

[MEMO ITEM]

**c. US Postmaster**

Full Name (Last, First, Middle Initial)  
Mailing Address 207 Elm Street

City Prescott State AR Zip Code 71857

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 09 / 2012

Amount of Each Disbursement this Period: 103.00

Transaction ID : D512383

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

**A. Visa Credit Card Operations**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 22116

City Tulsa State OK Zip Code 74121-2116

Purpose of Disbursement  
Credit card (see below if itemized)

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2012

Amount of Each Disbursement this Period: 707.03

Transaction ID : D512388

**B. Broadway Cafe**

Full Name (Last, First, Middle Initial)  
Mailing Address 617 South Broadway

City Little Rock State AR Zip Code 72201

Purpose of Disbursement  
Appreciation luncheon

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2012

Amount of Each Disbursement this Period: 208.94

Transaction ID : D512393

[MEMO ITEM]

**C. ExxonMobil**

Full Name (Last, First, Middle Initial)  
Mailing Address Various stations

City Arkadelphia State AR Zip Code 71923

Purpose of Disbursement  
Gas for movers

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2012

Amount of Each Disbursement this Period: 56.01

Transaction ID : D512392

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 707.03

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Love's Country Store</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address Hwy. 24		Amount of Each Disbursement this Period 53.06
City Prescott	State AR	Zip Code 71857
Purpose of Disbursement Gas	Category/ Type	
Candidate Name	Transaction ID : D512394	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Shell Oil</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address Various Stations		Amount of Each Disbursement this Period 89.00
City Hot Springs	State AR	Zip Code 71901-3633
Purpose of Disbursement Gas	Category/ Type	
Candidate Name	Transaction ID : D512390	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. U-Haul</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 2320 Albert Pike Rd		Amount of Each Disbursement this Period 82.54
City Hot Springs	State AR	Zip Code 71913-4608
Purpose of Disbursement Moving expenses	Category/ Type	
Candidate Name	Transaction ID : D512389	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 207 Elm Street		Amount of Each Disbursement this Period 45.00
City Prescott	State AR	
Zip Code 71857	Purpose of Disbursement Postage	Transaction ID : D512391
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	5413.41



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

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Chandler for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address P. O. BOX 12678		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D512371</b>
City LEXINGTON	State KY	
Zip Code 40508	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>A.B. CHANDLER III</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: KY District: 06	

Full Name (Last, First, Middle Initial) <b>B. Congressional Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2001 New Hampshire Ave, NW		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D512370</b>
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. FoodShare Arkansas</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012
Mailing Address PO Box 501		Amount of Each Disbursement this Period 809.71 <b>Transaction ID : D512402</b>
City Prescott	State AR	
Zip Code 71857	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4809.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Mike Ross for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. UACCH Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 2500 South Main		Amount of Each Disbursement this Period 250.00
City Hope	State AR Zip Code 71801	
Purpose of Disbursement Donation	Candidate Name	<b>Transaction ID : D512404</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. DEMOCRATIC PARTY OF ARKANSAS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 1300 West Capitol Avenue		Amount of Each Disbursement this Period 636.96
City Little Rock	State AR Zip Code 72201	
Purpose of Disbursement Contribution	Candidate Name	<b>Transaction ID : D512373</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	5059.71