

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Tom McMillin for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Laura Jost**

Mailing Address 1500 Ocean Dr. #1105

City Miami Beach State FL Zip Code 33139

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

Name of Employer Chandler Management Occupation Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : SA11AI.4273**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1500 Ocean Dr. #1105

City Miami Beach State FL Zip Code 33139

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

Name of Employer Chandler Management Occupation Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.4763**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1600 Ocean Dr., #1105

City Miami Beach State FL Zip Code 33139

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

Name of Employer Chandler Management Group Occupation Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11AI.4406**

Amount of Each Receipt this Period  
 2600.00

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

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

7800.00