

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

Thomas Massie for Congress

ADDRESS (number and street) ▼

PO Box 1444

Check if different than previously reported. (ACC)

Florence

KY

41022

2. **FEC IDENTIFICATION NUMBER** ▼

C C00509729

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

KY

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 Kevin Broghamer

Signature of Treasurer Kevin Broghamer

[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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Thomas Massie 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))....	91505.86	123475.86
(b) Total Contribution Refunds (from Line 20(d))	500	500
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	91005.86	122975.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	76813.93	132560.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	8.75	644.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	76805.18	131915.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	101269.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	50000	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Thomas Massie for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	44700	52450
(ii) Unitemized.....	578.33	1298.33
(iii) TOTAL of contributions from individuals ▶	45278.33	53748.33
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	46227.53	69727.53
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	91505.86	123475.86
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	8.75	644.74
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	91514.61	124120.6

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	76813.93	132560.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	30000	30000
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	30000	30000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	500	500
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500	500
21. OTHER DISBURSEMENTS	6000	6000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	113313.93	169060.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	123069.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	91514.61
25. SUBTOTAL (add Line 23 and Line 24).....	214583.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	113313.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	101269.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Gordon Hunter Bates

Mailing Address 12918 Crestmoor Circle

City Prospect State KY Zip Code 40059-8116

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

Name of Employer Republic Consulting, LLC Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-C4109

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jack S Deuser Jr.

Mailing Address 6016 Rock Cliff Lane Apt. B

City Alexandria State VA Zip Code 22315-4610

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

Name of Employer Smith-Free Group Occupation Senior Vice President

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2013

Transaction ID : A-C3987

Amount of Each Receipt this Period
500

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

Mailing Address 500 Scenic View Drive

City Corbin State KY Zip Code 40701-2150

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

Name of Employer Forcht Group Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4123

Amount of Each Receipt this Period
5200
 Reattribution/Redesignation requested

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

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

6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Terry E Forcht

Mailing Address 500 Scenic View Drive

City Corbin State KY Zip Code 40701-2150

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

Name of Employer Forcht Group Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4122

Amount of Each Receipt this Period
5200

Reattribution/Redesignation requested

B. Full Name (Last, First, Middle Initial)
Steven L. Frank

Mailing Address 1 Roebling Way
Unit 1103

City Covington State KY Zip Code 41011-2373

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

Name of Employer Wells Fargo Advisors Occupation Financial Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2013

Transaction ID : A-C4097

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
D. Talmage Hocker

Mailing Address 11 Overbrook Road

City Louisville State KY Zip Code 40207-1334

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

Name of Employer The Hocker Group Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4111

Amount of Each Receipt this Period
1000

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

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

7200.00

**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 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Richard Knock

Mailing Address **PO Box 710**

City **Union** State **KY** Zip Code **41091-0710**

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

Name of Employer **Knock Industries** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4136

Amount of Each Receipt this Period
10400

Reattribution/Redesignation requested

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

Mailing Address **126 S Creek Street**

City **Frankfort** State **KY** Zip Code **40601-4844**

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

Name of Employer **H.G. Mays Corporation** Occupation **Contractor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4112

Amount of Each Receipt this Period
1000

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

Mailing Address **3159 Rosina Avenue**

City **Covington** State **KY** Zip Code **41015-1055**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4125

Amount of Each Receipt this Period
500

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

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

11900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

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

Mailing Address 1749 Seaton Street NW

City Washington State DC Zip Code 20009-2625

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

Name of Employer Capitol Counsel Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2013

Transaction ID : A-C4048

Amount of Each Receipt this Period
1000

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

Mailing Address 20 W 11th Street Suite 200

City Covington State KY Zip Code 41011-4112

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

Name of Employer Self-Employed Occupation Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-C4110

Amount of Each Receipt this Period
2500

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC43

Amount of Each Receipt this Period
2500

Redesignation to Primary Debt Retirement
[MEMO ITEM]

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Caterina Schwinn

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC51

Amount of Each Receipt this Period
2500

Reattribution to spouse

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC52

Amount of Each Receipt this Period
-2500

Redesignation from primary

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC47

Amount of Each Receipt this Period
5200

Reattribution to spouse

[MEMO ITEM]

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

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

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 10 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Caterina Schwinn

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC48

Amount of Each Receipt this Period
-2600

Redesignation from primary

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC50

Amount of Each Receipt this Period
2600

Redesignation to general

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Occupation
 Avidyne Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 23 / 2013

Transaction ID : A-C3985

Amount of Each Receipt this Period
4000

Reattribution/Redesignation requested

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Dan Schwinn

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date **7500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC41

Amount of Each Receipt this Period
1500

Redesignation to Primary Debt Retirement
[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC42

Amount of Each Receipt this Period
-1500

Redesignation from primary
[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2013

Transaction ID : A-MC44

Amount of Each Receipt this Period
-2500

Reattribution from spouse
[MEMO ITEM]

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

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

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 12 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Dan Schwinn

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC45

Amount of Each Receipt this Period
-2600

Redesignation from primary

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC46

Amount of Each Receipt this Period
-5200

Reattribution from spouse

[MEMO ITEM]

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

Mailing Address PO Box 511028

City Melbourne Beach State FL Zip Code 32951-1028

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

Name of Employer Avidyne Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-MC49

Amount of Each Receipt this Period
2600

Redesignation to general

[MEMO ITEM]

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

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

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 13 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Dan Schwinn

Mailing Address **PO Box 511028**

City **Melbourne Beach** State **FL** Zip Code **32951-1028**

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

Name of Employer **Avidyne** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : A-C4092

Amount of Each Receipt this Period
10400

Reattribution/Redesignation requested

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

Mailing Address **3275 Georgetown Road**

City **Paris** State **KY** Zip Code **40361-9734**

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

Name of Employer **Forcht Group** Occupation **Executive Vice President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : A-C4124

Amount of Each Receipt this Period
1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

11400.00

44700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Altria Group, Inc. PAC

Mailing Address 101 Constitution Avenue NW
Suite 400W

City Washington State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C C00089136**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : A-C4119

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Arch Coal Inc. PAC

Mailing Address 1 City Center

City Saint Louis State MO Zip Code 63101-1816

FEC ID number of contributing federal political committee. **C C00167668**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : A-C4093

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
AT&T Inc. Federal PAC

Mailing Address 208 S Akard Street
Suite 2701

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2013

Transaction ID : A-C4059

Amount of Each Receipt this Period
2500

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
CULAC The PAC Of Credit Union National Association

Mailing Address 601 Pennsylvania Ave NW
South Building Ste 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 23 / 2013

Transaction ID : A-C3984

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
CULAC The PAC Of Credit Union National Association

Mailing Address 601 Pennsylvania Ave NW
South Building Ste 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A-C4042

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Greenberg Traurig, P.A. PAC

Mailing Address 54 State Street
Floor 6

City Albany State NY Zip Code 12207-2510

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2013

Transaction ID : A-C4041

Amount of Each Receipt this Period
2500

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
Honeywell International Political Action Committee

Mailing Address 101 Constitution Avenue NW
Suite 500 W

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
227.53

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013

Transaction ID : A-I4137

Amount of Each Receipt this Period
227.53

Inkind: Catering/Room Rental

B. Full Name (Last, First, Middle Initial)
Honeywell International Political Action Committee

Mailing Address 101 Constitution Avenue NW
Suite 500 W

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2013

Transaction ID : A-C4011

Amount of Each Receipt this Period
3000

C. Full Name (Last, First, Middle Initial)
Humana Inc. PAC

Mailing Address 975 F Street NW
Suite 550

City Washington State DC Zip Code 20004-1458

FEC ID number of contributing federal political committee. **C C00271007**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2013

Transaction ID : A-C4061

Amount of Each Receipt this Period
5000

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

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

8227.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
K&L Gates LLP PAC

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2013

Transaction ID : A-C3986

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Koch Industries Inc PAC

Mailing Address 600 14th Street NW Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : A-C4094

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Marathon Petroleum Corporation Employees PAC

Mailing Address PO Box 75000

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : A-C4098

Amount of Each Receipt this Period
 2500

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: (check only one)	PAGE 18 OF 43
	<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)
Thomas Massie for Congress

A. National Confectioners Association Of The United States Inc PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 30th Street NW
Suite 200

City Washington State DC Zip Code 20007-3769

FEC ID number of contributing federal political committee. **C C00003855**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2013

Transaction ID : A-C4058

Amount of Each Receipt this Period
2500

B. New York Life Insurance Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address 51 Madison Avenue
Room 1109

City New York State NY Zip Code 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : A-C4096

Amount of Each Receipt this Period
2500

C. Norfolk Southern Corporation Good Government Fund

Full Name (Last, First, Middle Initial)
Mailing Address 1 Constitution Avenue NE

City Washington State DC Zip Code 20002-5618

FEC ID number of contributing federal political committee. **C C00009282**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 08 / 2013

Transaction ID : A-C4043

Amount of Each Receipt this Period
2000

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 43
	<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)
Thomas Massie for Congress

A. Omnicare, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 River Center II
 100 East River Center Blvd
 City Covington State KY Zip Code 41101
 FEC ID number of contributing federal political committee. **C C00392886**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2013
Transaction ID : A-C4057
 Amount of Each Receipt this Period
 2500

B. Owner-Operator Independent Drivers Assn Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1000
 1 NW Ooida Dr
 City Grain Valley State MO Zip Code 64029-1000
 FEC ID number of contributing federal political committee. **C C00236778**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2013
Transaction ID : A-C4060
 Amount of Each Receipt this Period
 1000

C. Pitney Bowes Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Elmcroft Road
 Stop 63-20
 City Stamford State CT Zip Code 06926-0700
 FEC ID number of contributing federal political committee. **C C00339499**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : A-C4120
 Amount of Each Receipt this Period
 2500

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 43
	<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)
Thomas Massie for Congress

A. Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC

Mailing Address 1301 K Street NW
Suite 800W

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 08 / 2013

Transaction ID : A-C4044

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Trucking PAC Of The American Trucking Associations Inc.

Mailing Address 430 1st Street SE

City Washington State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C C00002881**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2013

Transaction ID : A-C4095

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Wine And Spirits Wholesalers Of America, Inc. PAC

Mailing Address 805 15th Street NW
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2013

Transaction ID : A-C4056

Amount of Each Receipt this Period
1000

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

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

4000.00

46227.53

**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 21 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 650 Transaction ID : B-E-3992
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Compliance Software	
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. Aristotle International, Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 975 Transaction ID : B-E-4067
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Compliance Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Beltway Catering		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 1251 Pine Hill Road		Amount of Each Disbursement this Period 1611.5 Transaction ID : B-E-4047
City Mc Lean State VA Zip Code 22101-2906	Purpose of Disbursement Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3236.50
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 22 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 1773.4
City Newport	State KY	
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name	Transaction ID : B-E-3949	
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. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2013
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 2502.08
City Newport	State KY	
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name	Transaction ID : B-E-3996	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Broghamer Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address 502 Monroe Street		Amount of Each Disbursement this Period 1853.77
City Newport	State KY	
Purpose of Disbursement Compliance Consulting	Category/ Type	
Candidate Name	Transaction ID : B-E-4031	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6129.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 43		
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2013
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 500 Transaction ID : B-E-4010
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Registration Fee	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. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 50 Transaction ID : B-E-3952
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 50 Transaction ID : B-E-3997
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	600.00
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 24 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 50 Transaction ID : B-E-4036
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Bank Fee	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. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 25 Transaction ID : B-E-4066
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Churchill Downs Incorporated		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2013
Mailing Address 600 N Hurstbourne Parkway Suite 400		Amount of Each Disbursement this Period 10465 Transaction ID : B-E-4091
City Louisville	State KY	
Zip Code 40222-5389	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10540.00
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 25 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Cincinnati Bell		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address PO Box 1199		Amount of Each Disbursement this Period 212.64 Transaction ID : B-E-3929
City Cincinnati	State OH	
Zip Code 45201-1199	Purpose of Disbursement Phone Service	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. Cincinnati Bell		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address PO Box 1199		Amount of Each Disbursement this Period 212.49 Transaction ID : B-E-3955
City Cincinnati	State OH	
Zip Code 45201-1199	Purpose of Disbursement Phone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Cincinnati Bell		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 1199		Amount of Each Disbursement this Period 20.78 Transaction ID : B-E-4022
City Cincinnati	State OH	
Zip Code 45201-1199	Purpose of Disbursement Phone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	445.91
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 26 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Cincinnati Bell		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2013
Mailing Address PO Box 1199		Amount of Each Disbursement this Period 105.05 Transaction ID : B-E-4090
City Cincinnati	State OH Zip Code 45201-1199	
Purpose of Disbursement Phone Service	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. Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 1700 Diagonal Road Suite 730		Amount of Each Disbursement this Period 1051 Transaction ID : B-E-3974
City Alexandria	State VA Zip Code 22314-2843	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. District City Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 4435.26 Transaction ID : B-E-4026
City Washington	State DC Zip Code 20011-4417	
Purpose of Disbursement Finance Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5591.31
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 27 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 118.37 Transaction ID : B-E-3950
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	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. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 16.07 Transaction ID : B-E-3951
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 15.26 Transaction ID : B-E-4023
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	149.70
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 28 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 117.54
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	Candidate Name	Transaction ID : B-E-4024
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. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 101.89
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	Candidate Name	Transaction ID : B-E-4063
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Duke Energy		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2013
Mailing Address PO Box 840		Amount of Each Disbursement this Period 15.33
City Cincinnati	State OH Zip Code 45201-0840	
Purpose of Disbursement Utilities	Candidate Name	Transaction ID : B-E-4087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	234.76
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 29 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Fleming County Republican Women's Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2013
Mailing Address 2638 Taylor Mill Road		Amount of Each Disbursement this Period 250 Transaction ID : B-E-3989
City Flemingsburg	State KY	
Zip Code 41041-7561	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Henry County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address PO Box 83		Amount of Each Disbursement this Period 370 Transaction ID : B-E-4037
City Campbellsburg	State KY	
Zip Code 40011-0083	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Honeywell International Political Action Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 101 Constitution Avenue NW Suite 500 W		Amount of Each Disbursement this Period 227.53 Transaction ID : B-I-4137
City Washington	State DC	
Zip Code 20001-2133	Purpose of Disbursement Inkind: Catering/Room Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	847.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Insight Business		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address PO Box 740273		Amount of Each Disbursement this Period 295 Transaction ID : B-E-3941
City Cincinnati	State OH Zip Code 45274-0273	
Purpose of Disbursement Internet Service	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. Insight Business		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2013
Mailing Address PO Box 740273		Amount of Each Disbursement this Period 110 Transaction ID : B-E-3982
City Cincinnati	State OH Zip Code 45274-0273	
Purpose of Disbursement Internet Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Insight Business		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 740273		Amount of Each Disbursement this Period 110 Transaction ID : B-E-4025
City Cincinnati	State OH Zip Code 45274-0273	
Purpose of Disbursement Internet Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	515.00
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 31 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Insight Business		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2013
Mailing Address PO Box 740273		Amount of Each Disbursement this Period 110 Transaction ID : B-E-4106
City Cincinnati	State OH Zip Code 45274-0273	
Purpose of Disbursement Internet Service	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. Kentucky Society Of Washington		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address PO Box 278		Amount of Each Disbursement this Period 250 Transaction ID : B-E-3978
City Washington	State DC Zip Code 20044-0278	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Liberty Political Solutions		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 497 Hooksett Road Suite 127		Amount of Each Disbursement this Period 26662.57 Transaction ID : B-E-3922
City Manchester	State NH Zip Code 03104-2632	
Purpose of Disbursement GOTV Consulting	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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	27022.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Lohr Printing		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 7660 Industrial Road		Amount of Each Disbursement this Period 96.5
City Florence	State KY	
Zip Code 41042-5600	Purpose of Disbursement Printing	Transaction ID : B-E-3927
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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Lohr Printing		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 7660 Industrial Road		Amount of Each Disbursement this Period 575.6
City Florence	State KY	
Zip Code 41042-5600	Purpose of Disbursement Printing	Transaction ID : B-E-3928
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 75
City Atlanta	State GA	
Zip Code 30318-5788	Purpose of Disbursement Software	Transaction ID : B-E-4000
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	747.10
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 33 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 75 Transaction ID : B-E-4034
City Atlanta State GA Zip Code 30318-5788	Purpose of Disbursement Software 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. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2013
Mailing Address 512 Means Street NW Suite 404		Amount of Each Disbursement this Period 75 Transaction ID : B-E-4104
City Atlanta State GA Zip Code 30318-5788	Purpose of Disbursement Software Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Oldham County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address 1800 Saint Andrews Court		Amount of Each Disbursement this Period 600 Transaction ID : B-E-4038
City La Grange State KY Zip Code 40031-8942	Purpose of Disbursement Event Tickets Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	750.00
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 34 OF 43			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Paycor Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 60 Transaction ID : B-E-3976
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	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. Paycor Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 121.3 Transaction ID : B-E-3999
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paycor Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 53.5 Transaction ID : B-E-4020
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	234.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Paycor Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 50 Transaction ID : B-E-4062
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Service	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. Saber Communications Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 101 Washington Street		Amount of Each Disbursement this Period 7500 Transaction ID : B-E-4068
City Fredericksburg	State VA Zip Code 22405-2361	
Purpose of Disbursement List Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shelby County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2013
Mailing Address 1881 Veechdale Road		Amount of Each Disbursement this Period 328 Transaction ID : B-E-4013
City Simpsonville	State KY Zip Code 40067-7641	
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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7878.00
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 36 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Smith & Elliott Real Estate Building, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 265 Main Street		Amount of Each Disbursement this Period 600 Transaction ID : B-E-3975
City Florence	State KY	
Zip Code 41042-2186	Purpose of Disbursement Rent	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. Smith & Elliott Real Estate Building, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2013
Mailing Address 265 Main Street		Amount of Each Disbursement this Period 600 Transaction ID : B-E-4017
City Florence	State KY	
Zip Code 41042-2186	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Smith & Elliott Real Estate Building, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2013
Mailing Address 265 Main Street		Amount of Each Disbursement this Period 600 Transaction ID : B-E-4065
City Florence	State KY	
Zip Code 41042-2186	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1800.00
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 37 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. The Stoneridge Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 4400 N Point Parkway Suite 190		Amount of Each Disbursement this Period 1610.76
City Alpharetta	State GA Zip Code 30022-2481	
Purpose of Disbursement Printing/Postage	Category/Type	Transaction ID : B-E-3930
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. The Stoneridge Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2013
Mailing Address 4400 N Point Parkway Suite 190		Amount of Each Disbursement this Period 469.91
City Alpharetta	State GA Zip Code 30022-2481	
Purpose of Disbursement Printing/Postage	Category/Type	Transaction ID : B-E-4006
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Stoneridge Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address 4400 N Point Parkway Suite 190		Amount of Each Disbursement this Period 668.5
City Alpharetta	State GA Zip Code 30022-2481	
Purpose of Disbursement Printing/Postage	Category/Type	Transaction ID : B-E-4039
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2749.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 43		
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Williamsburg Lodge		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2013
Mailing Address 310 S England Street		Amount of Each Disbursement this Period 514.2 Transaction ID : B-E-3973
City Williamsburg	State VA Zip Code 23185-4266	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Windstream		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2013
Mailing Address 4001 N Rodney Parham Road		Amount of Each Disbursement this Period 277.77 Transaction ID : B-E-4101
City Little Rock	State AR Zip Code 72212-2459	
Purpose of Disbursement Phone Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Lesley Elliott		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2013
Mailing Address 1217 Delafield Place NW		Amount of Each Disbursement this Period 3222.91 Transaction ID : B-E-3954
City Washington	State DC Zip Code 20011-4417	
Purpose of Disbursement Finance Consultant	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4014.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Lesley Elliott			Date of Disbursement MM / DD / YYYY 01 / 11 / 2013	
Mailing Address 1217 Delafield Place NW			Amount of Each Disbursement this Period 1612	
City Washington	State DC	Zip Code 20011-4417	Transaction ID : B-E-3956	
Purpose of Disbursement Finance Consulting		001 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement				
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)		
State:	District:			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement				
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)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1612.00
TOTAL This Period (last page this line number only).....	75098.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Thomas H. Massie		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2013
Mailing Address PO Box 1444		Amount of Each Disbursement this Period 30000
City Florence	State KY	
Zip Code 41022	Purpose of Disbursement Loan Repayment	Transaction ID : B-R-2
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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30000.00
TOTAL This Period (last page this line number only).....	30000.00

**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 41 OF 43			
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. Greg McNece		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2013
Mailing Address PO Box 1830		Amount of Each Disbursement this Period 250 Transaction ID : B-E-4117
City Davis	State CA	
Zip Code 95617-1830	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Greg McNece		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2013
Mailing Address PO Box 1830		Amount of Each Disbursement this Period 250 Transaction ID : B-E-4118
City Davis	State CA	
Zip Code 95617-1830	Purpose of Disbursement Contribution Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

**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 42 OF 43	
	<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)
Thomas Massie for Congress

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2013
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 6000
City Washington	State DC	Zip Code 20003-1838
Purpose of Disbursement Political Contribution	011	Transaction ID : B-E-4099
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.		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	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)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement		
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)	
State: District:		

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

**SCHEDULE C (FEC Form 3)
LOANS**

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L1

Thomas Massie for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Thomas H. Massie

Primary

Mailing Address
PO Box 1444

General

Other (specify) ▼

Primary 2012

City State ZIP Code
Florence KY 41022

Original Amount of Loan 80000	Cumulative Payment To Date 30000	Balance Outstanding at Close of This Period 50000
----------------------------------	-------------------------------------	--

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
03 / 27 / 2012

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

M M / D D / Y Y Y Y
None

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	50000.00
TOTALS This Period (last page in this line only).....	50000.00

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