

# 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

**AMIE HOEBER FOR CONGRESS**

ADDRESS (number and street) PO BOX 61438

Check if different than previously reported. (ACC)

POTOMAC MD 20859

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00582296

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

STATE ▼ DISTRICT MD 06

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on M M / D D / Y Y Y Y in the State of MD

06 / 26 / 2018

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on M M / D D / Y Y Y Y in the State of   

   /    /   

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y

04 / 01 / 2018 through 06 / 06 / 2018

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 Marston, Chris, , ,

Signature of Treasurer Marston, Chris, , , [Electronically Filed] Date M M / D D / Y Y Y Y

06 / 14 / 2018

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

Office Use Only							
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**AMIE HOEBER 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))....	27085.00	283501.12
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1225.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27085.00	282276.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	47378.87	242473.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	397.32
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47378.87	242076.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	99560.68	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	450000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**AMIE HOEBER FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y 06 / 06 / 2018

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22925.00	127594.12
(ii) Unitemized .....	4060.00	20457.00
(iii) TOTAL of contributions from individuals .....	26985.00	148051.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	100.00	16450.00
(d) The Candidate .....	0.00	119000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	27085.00	283501.12
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	397.32
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	27085.00	283898.44

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47378.87	242473.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1225.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1225.00
21. OTHER DISBURSEMENTS .....	0.00	1000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	47378.87	244698.35

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	119854.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	27085.00
25. SUBTOTAL (add Line 23 and Line 24).....	146939.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47378.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	99560.68

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

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

FOR LINE NUMBER: PAGE 5 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Albert, Brian, , ,**  
 Mailing Address 13106 Big Pool Rd  
 City Clear Spring State MD Zip Code 21722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State of MD Occupation Law Enforcement  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 22 2018  
**Transaction ID : SA11AI.8280**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Aldrich, David, , ,**  
 Mailing Address 9609 Atwood Rd  
 City Vienna State VA Zip Code 22182  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 29 2018  
**Transaction ID : SA11AI.8309**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Azbell, Shelley, , ,**  
 Mailing Address 1774 E Woodstone Dr  
 City Hayden State ID Zip Code 83835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 06 2018  
**Transaction ID : SA11AI.8314**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ► 1450.00  
**TOTAL** This Period (last page this line number only)..... ►

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

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

FOR LINE NUMBER: PAGE 6 OF 40  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Azbell-Garvey, Shelley, , ,**

Mailing Address 1774 E Woodstone Dr

City Hayden State ID Zip Code 83835

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

Name of Employer None Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 09 / 2018

Transaction ID : SA11AI.8301

Amount of Each Receipt this Period  
200.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Baker, Priscilla, , ,**

Mailing Address 9316 Mercy Hollow Ln

City Potomac State MD Zip Code 20854

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

Name of Employer None Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

Transaction ID : SA11AI.8387

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 3800 Leland St

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Self Occupation Consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 22 / 2018

Transaction ID : SA11AI.8288

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 40  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Berkowitz, Joan, , ,**

Mailing Address 1819 L Street NW

City Washington State DC Zip Code 20036

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

Name of Employer UMUC Occupation Adjunct Faculty

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 22 / 2018

Transaction ID : SA11AI.8353

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bowen, Howard, , ,**

Mailing Address 9651 Old National Pike

City Hagerstown State MD Zip Code 21740

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

Name of Employer Ewing Oil Occupation Executive

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 22 / 2018

Transaction ID : SA11AI.8348

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 511 Bolton Place

City Houston State TX Zip Code 77024

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

Name of Employer Butterfield Consulting Occupation Consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 29 / 2018

Transaction ID : SA11AI.8308

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3450.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Camp, John, , ,**  
Mailing Address 11728 Devilwood Dr

City Potomac State MD Zip Code 20854

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

Name of Employer Oxford Chase Development Occupation Real estate exec

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

**Transaction ID : SA11AI.8278**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Campbell, McKie, , ,**  
Mailing Address 9418 Old Mt Vernon Rd

City Alexandria State VA Zip Code 22309

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

Name of Employer Bluewater Strategies Occupation consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

**Transaction ID : SA11AI.8290**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Chu, David, , ,**  
Mailing Address 3729 Harrison St

City Washington State DC Zip Code 20015

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

Name of Employer IDA Occupation Economist

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018

**Transaction ID : SA11AI.8315**

Amount of Each Receipt this Period  
 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 40	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Clark, Robert, , ,**

Mailing Address 10510 Moxley Rd

City Damascus	State MD	Zip Code 20872
------------------	-------------	-------------------

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

Name of Employer Self	Occupation Real Estate
--------------------------	---------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 29 / 2018

**Transaction ID : SA11AI.8362**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Conway-Welch, Colleen, , ,**

Mailing Address 109 Lynwood Terrace

City Nashville	State TN	Zip Code 37205
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FEC ID number of contributing federal political committee. **C**

Name of Employer Vanderbilt University	Occupation Faculty
---	-----------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

**Transaction ID : SA11AI.8376**

Amount of Each Receipt this Period  
2450.00

Memo Item

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

Mailing Address 11100 Gilchrist Ct

City Potomac	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer City National Rochdale	Occupation Senior Advisor
--	------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

**Transaction ID : SA11AI.8317**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2950.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cort, Lisa, , ,**  
 Mailing Address 11100 Gilchrist Ct  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Investor  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8316**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Dawson, Robert, , ,**  
 Mailing Address 1214 Key Dr  
 City Alexandria State VA Zip Code 22302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dawson Associates Occupation President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8391**  
 Amount of Each Receipt this Period  
 275.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Delaney, Lawrence, , ,**  
 Mailing Address 10809 Balantre La  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2018  
**Transaction ID : SA11AI.8306**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Delaplaine, George, , , Jr**

Mailing Address 11732 Old Annapolis Rd

City Frederick State MD Zip Code 21701

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

Name of Employer Self Occupation Finance

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

**Transaction ID : SA11AI.8383**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Doore, Stan, , ,**

Mailing Address 12437 Pretoria Drive

City Silver Spring State MD Zip Code 20904

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

Name of Employer None Occupation Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2018

**Transaction ID : SA11AI.8393**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address PO Box 619

City Frederick State MD Zip Code 21705

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

Name of Employer Self Occupation proposal development consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 06 / 2018

**Transaction ID : SA11AI.8319**

Amount of Each Receipt this Period  
100.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Fordwich, Hilary, , ,**

Mailing Address 9714 Beman Woods Way

City Potomac    State MD    Zip Code 20854

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

Name of Employer Strelmark    Occupation Consultant

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

**Transaction ID : SA11AI.8339**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Freeman, John, , ,**

Mailing Address 1066 30th St NW

City Washington    State DC    Zip Code 20007

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

Name of Employer Chesapeake Mgmt Grp    Occupation Real Estate

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

**Transaction ID : SA11AI.8349**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

Mailing Address 2030 24th St NW

City Washington    State DC    Zip Code 20008

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

Name of Employer None    Occupation Retired

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2018

**Transaction ID : SA11AI.8291**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

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

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

\_\_\_\_\_ 1700.00

\_\_\_\_\_

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

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

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

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Guertin, Janet, , ,**  
 Mailing Address 10652 Knight Castle Dr  
 City Charlotte State NC Zip Code 28277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Dividend Factor Occupation President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8328**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hill, Judith, , ,**  
 Mailing Address 918 Missions Canyon Ln  
 City Santa Barbara State CA Zip Code 93105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Channel City Club Occupation CEO  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2018  
**Transaction ID : SA11AI.8358**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hoffman, Donald, , ,**  
 Mailing Address 13301 Manor Stone Dr  
 City Germantown State MD Zip Code 20874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Excel Services Corp Occupation Engineer  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8337**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Hoffman, Donald, , ,**  
Mailing Address 13301 Manor Stone Dr

City: Germantown State: MD Zip Code: 20874

FEC ID number of contributing federal political committee: C

Name of Employer: Excel Services Corp Occupation: Engineer

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt: 06 / 06 / 2018  
Transaction ID : SA11AI.8392

Amount of Each Receipt this Period: 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Huessy, Peter, , ,**  
Mailing Address 7526 Coddle Harbor Lane

City: Rockville State: MD Zip Code: 20854

FEC ID number of contributing federal political committee: C

Name of Employer: Nuclear Security Working Group Occupation: President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt: 04 / 22 / 2018  
Transaction ID : SA11AI.8287

Amount of Each Receipt this Period: 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jacobs, Shirley, , ,**  
Mailing Address 7300 Lynnhurst St

City: Chevy Chase State: MD Zip Code: 20815

FEC ID number of contributing federal political committee: C

Name of Employer: None Occupation: Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt: 06 / 06 / 2018  
Transaction ID : SA11AI.8381

Amount of Each Receipt this Period: 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1600.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**King, Thomas, , ,**  
 Mailing Address 9020 Bush Creek Circle  
 City Frederick State MD Zip Code 21704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Long & Foster Occupation Real Estate Agent  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8384**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lemkuhl, Taylor, , ,**  
 Mailing Address 19225 Lappans Rd  
 City Boonsboro State MD Zip Code 21713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018  
**Transaction ID : SA11AI.8355**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**McNulty, Anne, , ,**  
 Mailing Address PO Box 2097  
 City Naples State FL Zip Code 34106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2018  
**Transaction ID : SA11AI.8273**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1350.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 16 OF 40  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**McNulty, Anne, , ,**  
Mailing Address PO Box 2097

City: Naples State: FL Zip Code: 34106

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

Name of Employer: None Occupation: Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3000.00

Date of Receipt: 06 / 06 / 2018  
Transaction ID : SA11AI.8334

Amount of Each Receipt this Period: 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Mercier, John, , ,**  
Mailing Address 5524 Beech Ridge Dr

City: Fairfax State: VA Zip Code: 22030

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

Name of Employer: None Occupation: Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 06 / 06 / 2018  
Transaction ID : SA11AI.8325

Amount of Each Receipt this Period: 1200.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Northman, Eric, , ,**  
Mailing Address 11479 Round House Ct

City: Rancho Cordova State: CA Zip Code: 95670

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

Name of Employer: None Occupation: Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 06 / 2018  
Transaction ID : SA11AI.8379

Amount of Each Receipt this Period: 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2450.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Painter, Harold, , ,**

Mailing Address PO Box 768

City Gaithersburg State MD Zip Code 20884

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

Name of Employer Self Occupation CPA

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018

**Transaction ID : SA11AI.8372**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Peter, Phillips, , ,**

Mailing Address 10805 Tara Rd

City Potomac State MD Zip Code 20854

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

Name of Employer Ridge Global Occupation Senior VP

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018

**Transaction ID : SA11AI.8380**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 7712 Greentree Rd

City Bethesda State MD Zip Code 20817

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

Name of Employer Ernst & Young Occupation Tax

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2018

**Transaction ID : SA11AI.8367**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 750.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Richards, Jimmy, , III**

Mailing Address 12200 Billingsley Rd

City Waldorf State MD Zip Code 20602

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

Name of Employer Jimmy Richards&Sons Occupation Executive

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

Transaction ID : SA11AI.8276

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Runde, Daniel, , ,**

Mailing Address 6910 Bonheim Ct

City McLean State VA Zip Code 22101

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

Name of Employer CSIS Occupation Scholar

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2018

Transaction ID : SA11AI.8284

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 12131 Tall Trees Lane

City Manassas State VA Zip Code 20112

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

Name of Employer AECOM Occupation Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018

Transaction ID : SA11AI.8327

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 40  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Shank, William, , ,**  
 Mailing Address PO Box 165  
 City Hagerstown State MD Zip Code 21741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Keller Williams Realty Occupation Realtor  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8321**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Swink, Jim, , ,**  
 Mailing Address 17101 Black Rock Rd  
 City Germantown State MD Zip Code 20874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018  
**Transaction ID : SA11AI.8312**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Tu, Chengbiao, , ,**  
 Mailing Address 13637 Valley Oak Cir  
 City Rockville State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Enfocus Consulting Group Occupation Managing Director  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2018  
**Transaction ID : SA11AI.8396**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 20 OF 40	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)  
**AMIE HOEBER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Welch, Jasper, , ,**

Mailing Address 2121 Kirby Box 4

City Houston	State TX	Zip Code 77019
-----------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2018

**Transaction ID : SA11AI.8377**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22925.00

**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 21 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2018
Mailing Address 10156 Perkins Rd Ste 217F		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70810
Purpose of Disbursement Online Contribution Processing		Amount of Each Disbursement this Period 519.51
Candidate Name		Transaction ID : SB17.8272
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2018
Mailing Address 100 N Tyron St		FEC Identification Number C
City Charlotte	State NC	Zip Code 28255
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 12.00
Candidate Name		Transaction ID : SB17.8271
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bay Armoury</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2018
Mailing Address 1829 Bay St NE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraising Consulting		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.8246
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3531.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 40			
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bay Armoury</b>		Date of Disbursement
Mailing Address 1829 Bay St NE		M M / D D / Y Y Y Y 04 / 22 / 2018
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraising Consultant Expenses		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	359.43
State: District:		Transaction ID : SB17.8247
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Bay Armoury</b>		Date of Disbursement
Mailing Address 1829 Bay St NE		M M / D D / Y Y Y Y 05 / 30 / 2018
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraising Consulting		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	3000.00
State: District:		Transaction ID : SB17.8248
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Blenke, Art, , ,</b>		Date of Disbursement
Mailing Address 1627 Montrose Ave		M M / D D / Y Y Y Y 04 / 01 / 2018
City Laurel	State MD	Zip Code 20707
Purpose of Disbursement Campaign Consulting		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00
State: District:		Transaction ID : SB17.8243
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4359.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Blenke, Art, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 1627 Montrose Ave		FEC Identification Number C
City Laurel	State MD	Zip Code 20707
Purpose of Disbursement Campaign Consulting		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.8244
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Blenke, Art, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018
Mailing Address 1627 Montrose Ave		FEC Identification Number C
City Laurel	State MD	Zip Code 20707
Purpose of Disbursement Campaign Consulting		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.8245
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Country Roads Digital Media</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018
Mailing Address PO Box 944		FEC Identification Number C
City Lewisburg	State WV	Zip Code 24901
Purpose of Disbursement Billboard Advertising		Amount of Each Disbursement this Period 1200.00
Candidate Name		Transaction ID : SB17.8249
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Country Roads Digital Media</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018	
Mailing Address PO Box 944			FEC Identification Number C	
City Lewisburg	State WV	Zip Code 24901	Amount of Each Disbursement this Period - 1200.00	
Purpose of Disbursement Check Voided (See Apr Q, SB 17, 3/19/18)			Transaction ID : SB17.8270	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Currie, Neil, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018	
Mailing Address 10401 Lloyd Rd			FEC Identification Number C	
City Potomac	State MD	Zip Code 20854	Amount of Each Disbursement this Period 625.00	
Purpose of Disbursement Campaign Consulting			Transaction ID : SB17.8257	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Currie, Neil, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018	
Mailing Address 10401 Lloyd Rd			FEC Identification Number C	
City Potomac	State MD	Zip Code 20854	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Campaign Consulting			Transaction ID : SB17.8258	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ellington, Paul, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 14616 Crossing Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Campaign Consulting		Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/ Type	Transaction ID : SB17.8259
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ellington, Paul, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 14616 Crossing Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Reimbursement (See Below)		Amount of Each Disbursement this Period 530.69
Candidate Name	Category/ Type	Transaction ID : SB17.8260
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mitchell &amp; Best</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2018
Mailing Address 1686 E Gude Dr,		FEC Identification Number C
City Rockville	State MD	Zip Code 20850
Purpose of Disbursement Rent		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : SB17.8260.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5530.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Blakely Media</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018	
Mailing Address 652 Turn Leaf Trl			FEC Identification Number C	
City Hobe Sound	State FL	Zip Code 33455	Amount of Each Disbursement this Period 345.00	
Purpose of Disbursement Videography		Category/ Type	Transaction ID : SB17.8260.2	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ellington, Paul, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 14616 Crossing Rd			FEC Identification Number C	
City Rockville	State MD	Zip Code 20853	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : SB17.8261	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Ellington, Paul, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018	
Mailing Address 14616 Crossing Rd			FEC Identification Number C	
City Rockville	State MD	Zip Code 20853	Amount of Each Disbursement this Period 1989.30	
Purpose of Disbursement Reimbursement (See Below)		Category/ Type	Transaction ID : SB17.8262	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6989.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mitchell &amp; Best</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address 1686 E Gude Dr,		FEC Identification Number C
City Rockville	State MD	Zip Code 20850
Purpose of Disbursement Rent		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : SB17.8262.4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Printing Images, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2018
Mailing Address 12266 Wilkins Ave Ste A		FEC Identification Number C
City Rockville	State MD	Zip Code 20852
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 1627.10
Candidate Name	Category/ Type	Transaction ID : SB17.8262.5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ellington, Paul, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2018
Mailing Address 14616 Crossing Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Mileage Reimbursement		Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	Transaction ID : SB17.8262.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ellington, Paul, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2018
Mailing Address 14616 Crossing Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Mileage Reimbursement		Amount of Each Disbursement this Period 50.00
Candidate Name		Transaction ID : SB17.8262.7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ellington, Paul, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018
Mailing Address 14616 Crossing Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20853
Purpose of Disbursement Campaign Consulting		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.8263
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Executive Press</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018
Mailing Address 10412 Main St		FEC Identification Number C
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 195.33
Candidate Name		Transaction ID : SB17.8256
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5195.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOEBER, AMIE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2018
Mailing Address 9209 FOX MEADOW LN		FEC Identification Number C H6MD06212
City POTOMAC	State MD	Zip Code 20854
Purpose of Disbursement Reimbursement (See Below)		Amount of Each Disbursement this Period 253.09
Candidate Name		Transaction ID : SB17.8239
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD	District: 06	

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		Amount of Each Disbursement this Period 165.00
Candidate Name		Transaction ID : SB17.8239.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising		Amount of Each Disbursement this Period 56.21
Candidate Name		Transaction ID : SB17.8239.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	253.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Online Application		Amount of Each Disbursement this Period 31.88
Candidate Name		Transaction ID : SB17.8239.2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOEBER, AMIE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address 9209 FOX MEADOW LN		FEC Identification Number C H6MD06212
City POTOMAC	State MD	Zip Code 20854
Purpose of Disbursement Duplicate Reimbursement - Repaid 6/14, to be Reported Next Period		Amount of Each Disbursement this Period 253.09
Candidate Name		Transaction ID : SB17.8240
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD District: 06		

Full Name (Last, First, Middle Initial) <b>C. HOEBER, AMIE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018
Mailing Address 9209 FOX MEADOW LN		FEC Identification Number C H6MD06212
City POTOMAC	State MD	Zip Code 20854
Purpose of Disbursement Reimbursement (See Below)		Amount of Each Disbursement this Period 735.57
Candidate Name		Transaction ID : SB17.8241
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	988.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2018
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Digital Advertising	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8241.0
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Online Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 31.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8241.1
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. 28 South</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2018
Mailing Address 28 S Potomac St		FEC Identification Number C
City Hagerstown	State MD	Zip Code 21740
Purpose of Disbursement Food/Beverages	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 320.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8241.2
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 40			
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2018		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 125.00		
Purpose of Disbursement Digital Advertising		Category/ Type	Transaction ID : SB17.8241.4		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Knupp, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018		
Mailing Address 5821 Carol St			FEC Identification Number C		
City Huntingtown	State MD	Zip Code 20639	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : SB17.8253		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Knupp, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018		
Mailing Address 5821 Carol St			FEC Identification Number C		
City Huntingtown	State MD	Zip Code 20639	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : SB17.8254		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 40	
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Knupp, David, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018
Mailing Address 5821 Carol St		FEC Identification Number C
City Huntingtown	State MD	Zip Code 20639
Purpose of Disbursement Campaign Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8255
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. McHugh, Dan, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address 2006 Henry Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20850
Purpose of Disbursement Campaign Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8250
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. McHugh, Dan, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2018
Mailing Address 2006 Henry Rd		FEC Identification Number C
City Rockville	State MD	Zip Code 20850
Purpose of Disbursement Campaign Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8251
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 40			
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. McHugh, Dan, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018		
Mailing Address 2006 Henry Rd			FEC Identification Number C		
City Rockville	State MD	Zip Code 20850	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Campaign Consulting		Category/ Type	Transaction ID : SB17.8252		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Susan Gage Caterers</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018		
Mailing Address 7100 Old Landover Rd			FEC Identification Number C		
City Landover	State MD	Zip Code 20785	Amount of Each Disbursement this Period 3300.50		
Purpose of Disbursement Catering		Category/ Type	Transaction ID : SB17.8264		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. The Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2018		
Mailing Address 300 First St SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 645.36		
Purpose of Disbursement Catering		Category/ Type	Transaction ID : SB17.8266		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5445.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 40			
	<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)  
**AMIE HOEBER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WCBC AM &amp; FM</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address PO Box 1290			FEC Identification Number C		
City Cumberland	State MD	Zip Code 21501	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement Radio Advertising		Category/ Type	Transaction ID : SB17.8267		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. WCBC AM &amp; FM</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018		
Mailing Address PO Box 1290			FEC Identification Number C		
City Cumberland	State MD	Zip Code 21501	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement Radio Advertising		Category/ Type	Transaction ID : SB17.8268		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WCBC AM &amp; FM</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018		
Mailing Address PO Box 1290			FEC Identification Number C		
City Cumberland	State MD	Zip Code 21501	Amount of Each Disbursement this Period 720.00		
Purpose of Disbursement Radio Advertising		Category/ Type	Transaction ID : SB17.8269		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	47378.87

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **AMIE HOEBER FOR CONGRESS** Transaction ID : **SC/10.4720**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HOEBER, AMIE, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9209 FOX MEADOW LN			
City POTOMAC	State MD	ZIP Code 20854	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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<b>TERMS</b>	Date Incurred M 12 / D 31 / Y 2015	Date Due M M / D D / On Demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

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

NAME OF COMMITTEE (In Full) **AMIE HOEBER FOR CONGRESS** Transaction ID : **SC/10.5154**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HOEBER, AMIE, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9209 FOX MEADOW LN			
City POTOMAC	State MD	ZIP Code 20854	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 03 / D 12 / Y 2016	M M / D D / Y 3/12/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **AMIE HOEBER FOR CONGRESS** Transaction ID : **SC/10.5153**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item <b>HOEBER, AMIE, , ,</b>		Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9209 FOX MEADOW LN		
City POTOMAC	State MD	ZIP Code 20854
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 03 <sup>M</sup> / D 31 <sup>D</sup> / Y 2016 Y	M M / D D / On Demand <sup>Y</sup>	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

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

NAME OF COMMITTEE (In Full) **AMIE HOEBER FOR CONGRESS** Transaction ID : **SC/10.6460**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HOEBER, AMIE, , , <input type="checkbox"/> Memo Item		Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9209 FOX MEADOW LN		
City POTOMAC	State MD	ZIP Code 20854 <input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 10 / D 10 / Y 2016	M M / D D / Y 12/31/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

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

NAME OF COMMITTEE (In Full) **AMIE HOEBER FOR CONGRESS** Transaction ID : **SC/10.6629**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>HOEBER, AMIE, , ,</b>		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 9209 FOX MEADOW LN			
City POTOMAC	State MD	ZIP Code 20854	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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<b>TERMS</b>	Date Incurred M 11 / D 02 / Y 2016	Date Due M M / D D / Y 12/31/2016	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	450000.00

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