

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
McHenry for Congress

ADDRESS (number and street) PO Box 2165
Check if different than previously reported. (ACC) Gastonia NC 28053-2165
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00393629
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NC 10

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 05 / 08 / 2018 in the State of NC
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2018 through 04 / 18 / 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 Lisker, Lisa, , ,
Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date 04 / 26 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**McHenry 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))....	88675.00	1667700.00
(b) Total Contribution Refunds (from Line 20(d)) .....	3500.00	18200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	85175.00	1649500.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	76121.57	1011694.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4092.83
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	76121.57	1007601.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1245072.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

McHenry 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).....	28750.00	539625.00
(ii) Unitemized.....	425.00	8125.00
(iii) TOTAL of contributions from individuals ▶	29175.00	547750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	59500.00	1119950.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	88675.00	1667700.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	635113.02
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	4092.83
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	270.40
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	88675.00	2307176.25

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 39

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	76121.57	1011694.38
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	14700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	3500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3500.00	18200.00
21. OTHER DISBURSEMENTS .....	4400.00	1515030.50
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	84021.57	2544924.88

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1240419.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	88675.00
25. SUBTOTAL (add Line 23 and Line 24).....	1329094.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84021.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1245072.74

**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 39  
(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)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ASTINGER, EDWARD , G. , , III**  
 Mailing Address 4880 SANTA ROSA ROAD  
 City CAMARILLO State CA Zip Code 93012-5190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SALEM MEDIA GROUP Occupation CEO  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : SA11A.20732**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**CRAIG, MARK, , MR.,**  
 Mailing Address 1620 FAIRFAX ROAD  
 City GREENSBORO State NC Zip Code 27407-4139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer R.H. BARRINGER DISTRIBUTING Occupation PRESIDENT  
 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 / 18 / 2018  
**Transaction ID : SA11A.20711**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**D'ADDONA, VINCENT, , ,**  
 Mailing Address 341 HARBOR DRIVE  
 City LIDO BEACH State NY Zip Code 11561-4906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INSURANCE SALES  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : SA11A.20741**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00  
**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 39  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOODYEAR, CARLA, , ,**

Mailing Address 11401 N. BLACKHEATH RD

City SCOTTSDALE State AZ Zip Code 85254-4821

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : SA11A.20734

Amount of Each Receipt this Period  
2300.00

Memo Item CONTRIBUTION

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

Mailing Address 11401 N. BLACKHEATH RD

City SCOTTSDALE State AZ Zip Code 85254-4821

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : SA11A.20735

Amount of Each Receipt this Period  
2700.00

Memo Item CONTRIBUTION

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

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5104

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

Name of Employer Occupation  
DCI GROUP CEO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : SA11A.20713

Amount of Each Receipt this Period  
2700.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7700.00

**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 39  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOODYEAR, DOUGLAS, , ,**

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5104

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

Name of Employer DCI GROUP Occupation CEO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : SA11A.20714

Amount of Each Receipt this Period  
2700.00

Memo Item CONTRIBUTION

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

Mailing Address 4414 VINEYARD CREEK DRIVE

City GRAPEVINE State TX Zip Code 76051-1130

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

Name of Employer ELEVATE Occupation MANAGING DIRECTOR

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 / 18 / 2018

Transaction ID : SA11A.20737

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

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

Mailing Address 4113 SCOTLAND ROAD

City ALEXANDRIA State VA Zip Code 22309-3040

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

Name of Employer THE POTOMAC ADVOCATES Occupation INFORMATION REQUESTED PER BEST EFF

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 / 18 / 2018

Transaction ID : SA11A.20742

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4200.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 39  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JONES , JOHN , BAILEY , ,**  
Mailing Address P.O. BOX 1015

City CLEVELAND	State TN	Zip Code 37364-1015
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : SA11A.20555**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**JONES , JOHN , BAILEY , ,**  
Mailing Address P.O. BOX 1015

City CLEVELAND	State TN	Zip Code 37364-1015
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2018

**Transaction ID : SA11A.20700**

Amount of Each Receipt this Period  
- 300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**JONES , JOHN , BAILEY , ,**  
Mailing Address P.O. BOX 1015

City CLEVELAND	State TN	Zip Code 37364-1015
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2018

**Transaction ID : SA11A.20701**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<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 9 OF 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MCKINNEY, LOUIS, C., MR.,**  
Mailing Address 124 SHEEPNOSE DRIVE

City LAKE LURE State NC Zip Code 28746-8767

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2018

Transaction ID : SA11A.20418

Amount of Each Receipt this Period  
 2000.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**MCKINNEY, LOUIS, C., MR.,**  
Mailing Address 124 SHEEPNOSE DRIVE

City LAKE LURE State NC Zip Code 28746-8767

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2018

Transaction ID : SA11A.20698

Amount of Each Receipt this Period  
 - 1300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MCKINNEY, LOUIS, C., MR.,**  
Mailing Address 124 SHEEPNOSE DRIVE

City LAKE LURE State NC Zip Code 28746-8767

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2018

Transaction ID : SA11A.20699

Amount of Each Receipt this Period  
 1300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 39  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MILLER, KENNETH, , ,**  
Mailing Address 100 KEMP ROAD W.  
City GREENSBORO State NC Zip Code 27410-6039  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018  
Transaction ID : SA11A.20740  
Amount of Each Receipt this Period  
1500.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MINER, DAVID, , HONORABLE ,**  
Mailing Address 220 LION'S GATE DR.  
City CARY State NC Zip Code 27518-8710  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED PER BEST EFFC 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 / 18 / 2018  
Transaction ID : SA11A.20715  
Amount of Each Receipt this Period  
500.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NORTON, STEPHEN , J. , ,**  
Mailing Address 9 NINTH STREET SE  
City WASHINGTON State DC Zip Code 20003-1333  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DCI GROUP Occupation WRITER  
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 / 18 / 2018  
Transaction ID : SA11A.20736  
Amount of Each Receipt this Period  
250.00  
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 11 OF 39  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PALMER, DAN , S. , , JR.**

Mailing Address 1112 MONTANA AVENUE

City SANTA MONICA	State CA	Zip Code 90403-1652
----------------------	-------------	------------------------

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

Name of Employer PALMER INVESTMENTS	Occupation CEO
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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 / 18 / 2018

**Transaction ID : SA11A.20733**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4969 HILLBROOK LANE NW

City WASHINGTON	State DC	Zip Code 20016-3208
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11A.20738**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4969 HILLBROOK LANE NW

City WASHINGTON	State DC	Zip Code 20016-3208
--------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11A.20739**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8100.00
<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 12 OF 39  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARDSON, COREY, , DR. ,**

Mailing Address 227 5TH AVENUE NE

City HICKORY    State NC    Zip Code 28601-5026

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

Name of Employer SELF    Occupation PHYSICIAN

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11A.20726

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

Memo Item CONTRIBUTION

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

Mailing Address 9323 SARDIS GLEN DRIVE

City MATTHEWS    State NC    Zip Code 28105-1542

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

Name of Employer WINSTON & STRAWN LLP    Occupation ATTORNEY 9802759435

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 / 18 / 2018

Transaction ID : SA11A.20743

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

Memo Item CONTRIBUTION

**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).....▶	_____ 1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 28750.00

**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 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSN OF NURSE ANESTHETISTS PAC**

Mailing Address 25 MASSACHUSETTS AVENUE NW  
SUITE 550

City WASHINGTON State DC Zip Code 20001-1408

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11C.20728

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION PAC**

Mailing Address 1101 VERMONT AVENUE NW  
FLOOR 12

City WASHINGTON State DC Zip Code 20005-6309

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11C.20717

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALIT**

Mailing Address 1201 15TH STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11C.20709

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 39	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERISOURCEBERGEN CORPORATION PAC (ABC PAC)**

Mailing Address 1300 MORRIS DR.  
STE 100

City CHESTERBROOK	State PA	Zip Code 19087-5559
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00400929

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20725**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BROOKE HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMP**

Mailing Address 1 CORPORATE WAY

City LANSING	State MI	Zip Code 48951-1001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00254953

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20705**

Amount of Each Receipt this Period  
4000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BROOKE HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMP**

Mailing Address 1 CORPORATE WAY

City LANSING	State MI	Zip Code 48951-1001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00254953

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20706**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7500.00
<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: (check only one)	PAGE 15 OF 39
	<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)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES SCHWAB CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 325 7TH STREET NW, SUITE 200

City WASHINGTON	State DC	Zip Code 20004-2809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370114

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20708**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CNG HOLDINGS, INC. PAC**

Mailing Address 7755 MONTGOMERY ROAD SUITE 400

City CINCINNATI	State OH	Zip Code 45236-4197
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00441311

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20731**

Amount of Each Receipt this Period  
3000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COMPASS BANCSHARES, INC PAC**

Mailing Address SUE L BREWIS P O BOX 10566

City BIRMINGHAM	State AL	Zip Code 35296-0001
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142596

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20707**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	10500.00
<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 16 OF 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ELECTRONIC TRANSACTIONS ASSOCIATION PAC**

Mailing Address 1101 16TH STREET NW SUITE 402

City WASHINGTON	State DC	Zip Code 20036-4831
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00548198

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 18 / 2018

**Transaction ID : SA11C.20721**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELECTRONIC TRANSACTIONS ASSOCIATION PAC**

Mailing Address 1101 16TH STREET NW SUITE 402

City WASHINGTON	State DC	Zip Code 20036-4831
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00548198

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 18 / 2018

**Transaction ID : SA11C.20722**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**IRON MOUNTAIN INCORPORATED EMPLOYEES PAC**

Mailing Address 1 FEDERAL ST

City BOSTON	State MA	Zip Code 02110-2012
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00523936

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 18 / 2018

**Transaction ID : SA11C.20720**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7500.00
<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 17 OF 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McHenry 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: 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 / 18 / 2018

Transaction ID : SA11C.20718

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NAHU POLITICAL ACTION COMMITTEE**

Mailing Address 1212 NEW YORK AVENUE NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005-3987

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11C.20729

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 4300 WILSON BLVD  
SUITE 400

City ARLINGTON State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : SA11C.20704

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL CONFECTIONERS ASSOCIATION PAC**  
 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: 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 / 18 / 2018  
**Transaction ID : SA11C.20710**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NRA POLITICAL VICTORY FUND**  
 Mailing Address 11250 WAPLES MILL ROAD  
 City FAIRFAX State VA Zip Code 22030-7550  
 FEC ID number of contributing federal political committee. **C** C00053553  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : SA11C.20724**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PRINCIPAL LIFE INSURANCE COMPANY PAC**  
 Mailing Address 711 HIGH ST  
 City DES MOINES State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C** C00128918  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 8500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : SA11C.20719**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00  
**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 19 OF 39	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PROSPERITY ACTION INC.**

Mailing Address 320 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-1838
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00377689

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20716**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**S&P GLOBAL, INC. PAC**

Mailing Address 1200 G ST. NW  
SUITE 900

City WASHINGTON	State DC	Zip Code 20005-3821
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00494682

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20730**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SALEM COMMUNICATIONS CORPORATION PAC**

Mailing Address 4880 SANTA ROSA RD

City CAMARILLO	State CA	Zip Code 93012-5190
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00321158

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : SA11C.20723**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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: (check only one)		PAGE 20 OF 39	
<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)  
**McHenry for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)**

Mailing Address 1800 LARIMER STREET, SUITE 1600

City DENVER	State CO	Zip Code 80202-1408
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00107771

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

**Transaction ID : SA11C.20703**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item  
 CONTRIBUTION

**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).....▶	_____ 2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 59500.00

**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 39			
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. BOWEN, JAMES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018		
Mailing Address P.O. BOX 2165			FEC Identification Number C		
City GASTONIA	State NC	Zip Code 28053-2165	Amount of Each Disbursement this Period 288.64		
Purpose of Disbursement MILEAGE/CELL & INSURANCE STIPEND		Category/ Type	Transaction ID : SB17.I11380		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. MAPLES, KEITH, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018		
Mailing Address 2581 REIMER CT.			FEC Identification Number C		
City GASTONIA	State NC	Zip Code 28056-8495	Amount of Each Disbursement this Period 215.00		
Purpose of Disbursement WALKERS/DOOR KNOCKERS		Category/ Type	Transaction ID : SB17.I11378		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. MEMMOTT, ERIN, MELLINGER, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2018		
Mailing Address 1336 G STREET NE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20002-4426	Amount of Each Disbursement this Period 1626.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.I11384		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2129.64
<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 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. MOSS, JARVIS, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 3117 GLACIER CT		FEC Identification Number C
City GASTONIA	State NC	Zip Code 28056-6339
Purpose of Disbursement WALKERS/DOOR KNOCKERS		Amount of Each Disbursement this Period 380.00
Candidate Name		Transaction ID : SB17.I11379
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2018
Mailing Address 450 LAUREL STREET SUITE 2105		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70801-1821
Purpose of Disbursement ONLINE PROCESSING		Amount of Each Disbursement this Period 2.11
Candidate Name		Transaction ID : SB17.I11372
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018
Mailing Address 450 LAUREL STREET SUITE 2105		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70801-1821
Purpose of Disbursement ONLINE PROCESSING		Amount of Each Disbursement this Period 118.69
Candidate Name		Transaction ID : SB17.I11391
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. BUSINESS CARD</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address PO BOX 15469			FEC Identification Number C	
City WILMINGTON	State DE	Zip Code 19850-5469	Amount of Each Disbursement this Period 3705.09	
Purpose of Disbursement CREDIT CARD PAYMENT- SEE MEMOS			Transaction ID : SB17.I11381	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ACQUA AL 2</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address 212 7TH STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 85.50	
Purpose of Disbursement MEETING EXPENSE			Transaction ID : SB17.I11397	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address P.O. BOX 619616			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75261	Amount of Each Disbursement this Period 2688.58	
Purpose of Disbursement TRAVEL			Transaction ID : SB17.I11394	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3705.09
<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 24 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 60 MASSACHUSETTS AVENUE NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20002-4285
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 168.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11395 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAVENDISH BREWING CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 207 N CHESTER ST.		FEC Identification Number C
City GASTONIA	State NC	Zip Code 28052-2234
Purpose of Disbursement MEETING EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 43.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11405 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COURT STREET GRILLE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 113 COURT SQUARE		FEC Identification Number C
City LINCOLNTON	State NC	Zip Code 28092-2739
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 37.96	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11399 <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 25 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. SWEETGREEN</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address 1212 4TH ST. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-3482	Amount of Each Disbursement this Period 73.81	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11396	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TAYLOR GOURMET</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address 1750 PENNSYLVANIA AVE NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Disbursement this Period 15.91	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I11411	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE STRING BEAN</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address 1310 W CAMPBELL RD			FEC Identification Number C	
City RICHARDSON	State TX	Zip Code 75080-3104	Amount of Each Disbursement this Period 103.42	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11406	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 26 OF 39			
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. CENTURY LINK</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018		
Mailing Address PO BOX 96064			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28296-0064	Amount of Each Disbursement this Period 75.74		
Purpose of Disbursement TELEPHONE		Category/Type	Transaction ID : SB17.I11382		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. CHASE CREDIT CARD</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018		
Mailing Address PO BOX 15650			FEC Identification Number C		
City WILMINGTON	State DE	Zip Code 19886-5650	Amount of Each Disbursement this Period 10247.17		
Purpose of Disbursement CREDIT CARD PAYMENT- SEE MEMOS		Category/Type	Transaction ID : SB17.I11385		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ACQUA AL 2</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018		
Mailing Address 212 7TH STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2696.80		
Purpose of Disbursement EVENT CATERING		Category/Type	Transaction ID : SB17.I11425		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10322.91
<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 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616

City DALLAS State TX Zip Code 75261

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 486.60

Transaction ID : SB17.I11427

Memo Item

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

Mailing Address 300 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement EVENT CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 790.98

Transaction ID : SB17.I11418

Memo Item

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

Mailing Address 4237 WISCONSIN AVE NW

City WASHINGTON State DC Zip Code 20016-2153

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 21.70

Transaction ID : SB17.I11456

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. CHIPOTLE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 550 BORADWAY		FEC Identification Number C
City DENVER	State CO	Zip Code 80203-3424
Purpose of Disbursement FOOD/BEVERAGE		Amount of Each Disbursement this Period 22.98
Candidate Name		Transaction ID : SB17.I11416
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. COURT STREET GRILLE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 113 COURT SQUARE		FEC Identification Number C
City LINCOLNTON	State NC	Zip Code 28092-2739
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 36.29
Candidate Name		Transaction ID : SB17.I11448
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. DC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 2606 BLADENSBURG RD. NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20018-1423
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 57.15
Candidate Name		Transaction ID : SB17.I11452
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<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 29 OF 39	
	<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)  
**McHenry for Congress**

<b>A. FARM BUREAU INSURANCE (NORTH CAROLINA FARM BUREAU INSURANCE)</b> Full Name (Last, First, Middle Initial) FARM BUREAU INSURANCE (NORTH CAROLINA FARM BUREAU INSURANCE)		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address PO BOX 27766		FEC Identification Number C
City RALEIGH State NC Zip Code 27611-7766	Amount of Each Disbursement this Period 175.00	
Purpose of Disbursement INSURANCE Candidate Name		Transaction ID : SB17.I11446 <input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:		

<b>B. FEDEX</b> Full Name (Last, First, Middle Initial) FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 387 AIRWAYS DEPARTMENT 4634		FEC Identification Number C
City MEMPHIS State TN Zip Code 38116	Amount of Each Disbursement this Period 60.88	
Purpose of Disbursement SHIPPING Candidate Name		Transaction ID : SB17.I11433 <input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:		

<b>C. FEDEX</b> Full Name (Last, First, Middle Initial) FEDEX		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 387 AIRWAYS DEPARTMENT 4634		FEC Identification Number C
City MEMPHIS State TN Zip Code 38116	Amount of Each Disbursement this Period 73.11	
Purpose of Disbursement SHIPPING Candidate Name		Transaction ID : SB17.I11449 <input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:		

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

**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 30 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF THE NRA</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address PO BOX 69			FEC Identification Number C	
City WACO	State NC	Zip Code 28169-0069	Amount of Each Disbursement this Period 105.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11434	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. GASTON REGIONAL CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 601 W FRANKLIN BOULEVARD			FEC Identification Number C	
City GASTONIA	State NC	Zip Code 28052-3828	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11459	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. HARRIS TEETER</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address CONSTITUTION SQUARE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 55.24	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11428	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 31 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. HARRIS TEETER</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address CONSTITUTION SQUARE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 22.89	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I11429	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NEW CONGRESSIONAL LIQUOR</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 404 1ST ST. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1826	Amount of Each Disbursement this Period 79.83	
Purpose of Disbursement EVENT CATERING		Category/ Type	Transaction ID : SB17.I11413	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PANERA BREAD</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 673 H ST. NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001-3731	Amount of Each Disbursement this Period 8.75	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I11444	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. RITZ CARLTON KEY BISCAYNE</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 455 GRAND BAY DR.			FEC Identification Number C	
City KEY BISCAYNE	State FL	Zip Code 33149	Amount of Each Disbursement this Period 575.73	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I11419	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ROTI MEDITERRANEAN GRILL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 1747 PENNSYLVANIA AVENUE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20006-4604	Amount of Each Disbursement this Period 94.32	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11423	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SEVENTH HILL PIZZA</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 327 7TH SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 41.25	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : SB17.I11426	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 33 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. SWEETGREEN</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 1212 4TH ST. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-3482	Amount of Each Disbursement this Period 11.11	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I11424	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TAPCO</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address PO BOX 286			FEC Identification Number C	
City BURLINGTON	State NC	Zip Code 27216-0286	Amount of Each Disbursement this Period 637.00	
Purpose of Disbursement INSURANCE		Category/ Type	Transaction ID : SB17.I11442	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE DESOTO HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 15 E LIBERTY			FEC Identification Number C	
City SAVANNAH	State GA	Zip Code 31401	Amount of Each Disbursement this Period 513.37	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I11455	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 34 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GREENBRIER</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 300 W MAIN ST.			FEC Identification Number C	
City WHITE SULPHUR SPRI	State WV	Zip Code 24986	Amount of Each Disbursement this Period 2436.74	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I11458	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TRADER JOES</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 750 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 45.71	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type	Transaction ID : SB17.I11454	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018	
Mailing Address 182 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 158.81	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.I11415	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<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 35 OF 39			
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 2300 18TH STREET NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009-1892
Purpose of Disbursement POSTAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 50.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11441 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 1593 SPRING HILL RD., STE. 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement SUBSCRIPTIONS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 798.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11383 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IMGE LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018
Mailing Address 603 KING STREET		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement DIGITAL ADS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I11388 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5298.00
<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 36 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. SCR &amp; ASSOCIATES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018	
Mailing Address 100 TRADECENTER STE. G-700			FEC Identification Number C	
City WOBURN	State MA	Zip Code 01801-1851	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.I11374	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE OORBEEK GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018	
Mailing Address 5614 GARNETTS FARMS DRIVE			FEC Identification Number C	
City HAYMARKET	State VA	Zip Code 20169	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.I11390	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE STEWART GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018	
Mailing Address PO BOX 26508			FEC Identification Number C	
City RALEIGH	State NC	Zip Code 27611-6508	Amount of Each Disbursement this Period 46340.28	
Purpose of Disbursement SIGNAGE/DIRECT MAIL		Category/ Type	Transaction ID : SB17.I11389	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	53340.28
<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 37 OF 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 124.85	
Purpose of Disbursement CELL PHONE		Category/Type	Transaction ID : SB17.I11392	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CLEVELAND COUNTY REPUBLICAN PARTY</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018	
Mailing Address P.O. BOX 1236			FEC Identification Number C	
City SHELBY	State NC	Zip Code 28151-1236	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I11375	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	624.85
<b>TOTAL</b> This Period (last page this line number only).....▶	75921.57

**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 39	
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2018
Mailing Address 101 CONSTITUTION AVE., NW SUITE 700		FEC Identification Number C C00147066
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement REFUND OF CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB20C.I11387
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. CBOE GLOBAL MARKETS, INC. PAC (CBOE PAC)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2018
Mailing Address 400 S. LASALLE STREET		FEC Identification Number C C00100693
City CHICAGO	State IL	Zip Code 60605
Purpose of Disbursement REFUND OF CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB20C.I11387
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3500.00

**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 39 OF 39			
	<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)  
**McHenry for Congress**

Full Name (Last, First, Middle Initial) <b>A. HESED HOUSE OF HOPE</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2018
Mailing Address 100 ANN GAITHER CT.			FEC Identification Number C
City LINCOLNTON	State NC	Zip Code 28092	Amount of Each Disbursement this Period 2700.00
Purpose of Disbursement CHARITABLE CONTRIBUTION		Category/ Type	Transaction ID : SB21.I11386
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. NORTH CAROLINA REPUBLICAN PARTY</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 1506 HILLSBOROUGH ST			FEC Identification Number C
City RALEIGH	State NC	Zip Code 27605-1831	Amount of Each Disbursement this Period 1700.00
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.I11376
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4400.00