

# 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

Jason Smith for Congress

ADDRESS (number and street) ▼

PO Box 1324

Check if different than previously reported. (ACC)

Cape Girardeau

MO

63702-1324

2. **FEC IDENTIFICATION NUMBER** ▼

C C00541862

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MO

08

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

(a) Quarterly Reports:

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

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Ellen Brandom

Signature of Treasurer Ellen Brandom

[Electronically Filed]

Date

/  /

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

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

Write or Type Committee Name

**Jason Smith 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))....	236627.40	385821.41
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	236627.40	385821.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	64368.90	178746.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	425.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64368.90	178320.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	416400.93	
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 12/2003)

Write or Type Committee Name

**Jason Smith for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	81910.00	104060.00
(ii) Unitemized.....	12380.00	12531.00
(iii) TOTAL of contributions from individuals ▶	94290.00	116591.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	142337.40	269230.41
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	236627.40	385821.41
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	7287.60	21873.82
<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	425.51
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	50.06	50.16
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	243965.06	408170.90

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64368.90	178746.20
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS .....	0.00	65.32
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	64368.90	178811.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	236804.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	243965.06
25. SUBTOTAL (add Line 23 and Line 24).....	480769.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	64368.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	416400.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Angela Fitzgerald**

Mailing Address 3720 E Highway 60

City Charleston State MO Zip Code 63834-8348

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

Name of Employer homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A58EB130427D040ECAFO**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 467 Farrar Drive

City Cape Girardeau State MO Zip Code 63701-4906

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2015

**Transaction ID : AC2A653850D9E40BFA5E**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 10 Sunningdale Drive

City Saint Louis State MO Zip Code 63124-1624

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

Name of Employer NA Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A4D712E17F6CE4D5E912**

Amount of Each Receipt this Period  
 2300.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey McMillen**

Mailing Address 8623 Leroy Place

City State Zip Code  
Fairfax VA 22031-3306

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

Name of Employer Occupation  
Akin Gump Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : A941870B6BE654FEE946**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 15691 State Highway 164

City State Zip Code  
Hornersville MO 63855-9702

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

Name of Employer Occupation  
Self Employed Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 01 / 2015

**Transaction ID : A015F663E9F2C4DB29E6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2560 Nicky Lane

City State Zip Code  
Alexandria VA 22311-1312

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

Name of Employer Occupation  
Washington Tax & Public Poli Sr. Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : A763E71A691E747EFB7B**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rodger Lesh**

Mailing Address **PO Box 123**

City **Ellington** State **MO** Zip Code **63638-0123**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2015**

**Transaction ID : AECE2A4ADFFE1428AB87**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address **211 Manor Dr**

City **Edinburg** State **VA** Zip Code **22824-3566**

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

Name of Employer **Greenberg Traurig** Occupation **Governmental Affairs**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 17 / 2015**

**Transaction ID : AAFE075FCD35D4CFCBF4**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address **1126 County Road 213**

City **Cape Girardeau** State **MO** Zip Code **63701-9590**

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

Name of Employer **SEMO Ready Mix** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2015**

**Transaction ID : A9BD53A9F9561436991E**

Amount of Each Receipt this Period  
 250.00

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

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

1050.00

**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 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roy Pfautch**

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108-1242

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

Name of Employer Civic Service, Inc. Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : AA62C0F7FFE924F13978**

Amount of Each Receipt this Period  
 2700.00

5400.00

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

Mailing Address 11215 Marwood Hill Drive

City Potomac State MD Zip Code 20854-1241

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

Name of Employer Washington Tax & Public Policy Group Occupation Founder & Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : AD1CC34DC696F40ABBE6**

Amount of Each Receipt this Period  
 500.00

1000.00

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

Mailing Address PO Box 349

City Salem State MO Zip Code 65560-0349

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

Name of Employer Town & Country Bank Occupation Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A2396BD9DCDD24A09A81**

Amount of Each Receipt this Period  
 1000.00

1000.00

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

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

4200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A. Gregg Hartley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 857 Cedar Dr

City Deale	State MD	Zip Code 20751-9613
---------------	-------------	------------------------

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

Name of Employer Cloakroom Advisors	Occupation Principal
--	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A825DAD111DFA420783B**

Amount of Each Receipt this Period  
1000.00

**B. Bill Honeycutt**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 650

City Cabool	State MO	Zip Code 65689-0650
----------------	-------------	------------------------

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

Name of Employer Cabool Lease Inc.	Occupation President
---------------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : A1A8F93ABB75E4DDD8F5**

Amount of Each Receipt this Period  
250.00

**C. Gary Crump**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 787

City Bernie	State MO	Zip Code 63822-0787
----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : A9EFEB5152E924DA983E**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

**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 98  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Rust**

Mailing Address 250 Birdsong Lane

City State Zip Code  
Cape Girardeau MO 63701-8143

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

Name of Employer Occupation  
NA Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : AD17854286E034CC0983**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1313 State Highway P

City State Zip Code  
New Madrid MO 63869-9112

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

Name of Employer Occupation  
Self-employed Landowner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : A438ED5BFFD8C493C9A5**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 6400 Ridge Dr

City State Zip Code  
Bethesda MD 20816-2638

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

Name of Employer Occupation  
The Ingram Group Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AECDA895667A1427DBD1**

Amount of Each Receipt this Period  
1000.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Denny LaBantschnig**

Mailing Address 11840 Meadowview Rd

City	State	Zip Code
Rolla	MO	65401-7760

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

Name of Employer	Occupation
The Community Partnership	Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : ADEE6DCBB0030484DA6F**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**W. James Barnett Jr.**

Mailing Address 740 Four Mile Road

City	State	Zip Code
Cuba	MO	65453-9364

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

Name of Employer	Occupation
People's Bank	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A27482AFF2C074586A9C**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**R. Scott Matthews Jr.**

Mailing Address PO Box 506

City	State	Zip Code
Sikeston	MO	63801-0506

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

Name of Employer	Occupation
Matthews Farms Inc.	Farm Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : AFDD66FA394574FEAB17**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Donald J Fuchs**

Mailing Address 525 Highway Dd

City Cuba State MO Zip Code 65453-8004

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

Name of Employer Self Occupation DDS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AA02700CF60914F3CBF8**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1214 Timber Creek Drive

City Cape Girardeau State MO Zip Code 63701-2621

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

Name of Employer Southeast Health System Occupation President and CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : AECD8AC008E9B423388F**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1923 Silverthorne Trail

City Cape Girardeau State MO Zip Code 63701-1891

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

Name of Employer Self Employed Occupation Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A8CC644D2F7E44FF6886**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James McDonnell III**

Mailing Address 40 Glen Eagles Drive

City Saint Louis State MO Zip Code 63124-1653

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

Name of Employer NA Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : A1FE793773AD7452AAB7**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 656 State Highway K

City Portageville State MO Zip Code 63873-8349

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A9719D16373B04BB184F**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 911 Tirrill Farms Road

City Saint Louis State MO Zip Code 63124-1631

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

Name of Employer Bryan Cave Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : A539ABCD5DA1F48088CA**

Amount of Each Receipt this Period  
 2700.00

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

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

5650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Trey Curtis**

Mailing Address 323 White Oaks Lane

City State Zip Code  
Cape Girardeau MO 63701-9027

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

Name of Employer Occupation  
Monsanto Regional Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2015

**Transaction ID : A06E5701F17074FA5AFE**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1203 Fairfield

City State Zip Code  
Sikeston MO 63801-5018

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

Name of Employer Occupation  
Self Employed Real Estate Appraiser

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2015

**Transaction ID : ACE46DD6C6C2B4AA49AB**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 595

City State Zip Code  
Sikeston MO 63801-0595

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

Name of Employer Occupation  
homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

**Transaction ID : A3F209B3290084CF7BD6**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Wilcox**

Mailing Address 9325 Renshaw Drive

City State Zip Code  
Bethesda MD 20817-2227

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

Name of Employer Occupation  
Capitol Tax Partners Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 02 / 2015

**Transaction ID : A313D7C793130484C9E4**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 201 Kramer Dr

City State Zip Code  
Sikeston MO 63801-4748

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

Name of Employer Occupation  
Self Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015

**Transaction ID : A311878CB44344040AB0**

Amount of Each Receipt this Period  
900.00

**C.** Full Name (Last, First, Middle Initial)  
**Bob R Brooks Jr.**

Mailing Address 1107 North Pitt Street  
Unit 2C

City State Zip Code  
Alexandria VA 22314-1462

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

Name of Employer Occupation  
Alpine Group Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 02 / 2015

**Transaction ID : A3A9ADF4DDED94B1FBDE**

Amount of Each Receipt this Period  
500.00

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

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

1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ray Rehder**

Mailing Address **PO Box 1725**

City **Sikeston** State **MO** Zip Code **63801-1725**

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

Name of Employer **Integrity Communications** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : A18377B858E9945C8914**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **8323 Woodacre Street**

City **Alexandria** State **VA** Zip Code **22308-1627**

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

Name of Employer **Step toe & Johnson LLP** Occupation **Managing Director of Government Affair**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 01 / 2015**

**Transaction ID : A623219750A1746CAB9B**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **911 Tirrill Farms Road**

City **Saint Louis** State **MO** Zip Code **63124-1631**

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

Name of Employer **NA** Occupation **Homemaker**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2015**

**Transaction ID : A80D6AEF223CE4CD7856**

Amount of Each Receipt this Period  
**2700.00**

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

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

**3950.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Joseph M Malters**

Mailing Address 10685 Larson Lane

City Rolla State MO Zip Code 65401-8108

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

Name of Employer The Dermatology Center Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A203D0F33A8534813A0E**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 27

City Rolla State MO Zip Code 65402-0027

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

Name of Employer Partner Occupation Sellers-Sexton, Inc.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : ACE22FCE7164E456C941**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 101 Primrose Street

City Chevy Chase State MD Zip Code 20815-3324

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

Name of Employer Thorn Run Partners Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A7855C5444F5B47F48AF**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

**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 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Crader**

Mailing Address 2570 Saint Andrews Courts

City Jackson State MO Zip Code 63755-3378

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

Name of Employer Bank of Missouri Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AB28825CD42B448A08C6**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2454 S 413th Road

City East Prairie State MO Zip Code 63845-8111

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : AD355FCFE82544F3D83E**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 56295 Little Moniteau Road

City California State MO Zip Code 65018-3069

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

Name of Employer Husch Blackwell Sanders LLP Occupation Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AEC5F8EB692ED47A2BB0**

Amount of Each Receipt this Period  
 250.00

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

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

2250.00

**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 98  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Hawkins**

Mailing Address **PO Box 28**

City **Matthews** State **MO** Zip Code **63867-0028**

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

Name of Employer **Self** Occupation **Farmer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2015**

**Transaction ID : A4A505F75999545CA934**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **718 Big Spring Boulevard**

City **Perryville** State **MO** Zip Code **63775-2815**

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

Name of Employer **Self Employed** Occupation **Optometrist**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2015**

**Transaction ID : A55D719218D3340768D3**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bob R Brooks Jr.**

Mailing Address **1107 North Pitt Street  
Unit 2C**

City **Alexandria** State **VA** Zip Code **22314-1462**

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

Name of Employer **Alpine Group** Occupation **Government Relations**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2015**

**Transaction ID : A1398347816C9424BA13**

Amount of Each Receipt this Period  
**2000.00**

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

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

**3250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael R Roberts**

Mailing Address 2725 Clouse Road

City Mansfield State MO Zip Code 65704-8152

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

Name of Employer Mansfield Building Supply Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AB091875171F04C3E9B8**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 705 Forest Drive

City Sullivan State MO Zip Code 63080-2914

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

Name of Employer West Brothers Chrysler, Inc. Occupation Auto Dealer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : ADF71182236264C2792F**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address PO Box 671

City Sullivan State MO Zip Code 63080-0671

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

Name of Employer Peterson Oil Company Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2015

**Transaction ID : A852FD308E31F4D51879**

Amount of Each Receipt this Period  
 1500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Terry Brewer**

Mailing Address 17101 County Road 8440

City	State	Zip Code
Rolla	MO	65401-5721

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

Name of Employer	Occupation
Brewer Science	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 24 / 2015

**Transaction ID : A0383803DC1994FFBDO**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 5831 Dalhousie

City	State	Zip Code
Cape Girardeau	MO	63701-7410

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

Name of Employer	Occupation
The Source - Yoga n More	Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : A95CD9C17EFF44FC69C6**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1722 N. Nelson Street

City	State	Zip Code
Arlington	VA	22207-3643

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

Name of Employer	Occupation
Blue Stone Stategies	Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A88ABE904A63C4503B94**

Amount of Each Receipt this Period  
 500.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Bruns**

Mailing Address 18608 Maries Road 531

City Rolla State MO Zip Code 65401-6469

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 16 / 2015

**Transaction ID : A2E599ED1B0F648DBBC4**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 857 Cedar Dr

City Deale State MD Zip Code 20751-9613

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

Name of Employer Cloakroom Advisors Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : AA5F21D6D2C9840868AE**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 2505 Horse Shoe Ridge

City Cape Girardeau State MO Zip Code 63701-1519

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

Name of Employer Self Employed Occupation Oral Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2015

**Transaction ID : A200A79574E484F14865**

Amount of Each Receipt this Period  
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W.F. Provance**

Mailing Address **PO Box 281**

City **Malden** State **MO** Zip Code **63863-0281**

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

Name of Employer **BPS Telephone Co.** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2015**

**Transaction ID : A5E015CB85B454D31A19**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **PO Box 98**

City **Campbell** State **MO** Zip Code **63933-0098**

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

Name of Employer **Self Employed** Occupation **Cotton Ginner**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2015**

**Transaction ID : AD19680CA563B435BAB7**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **PO Box 609**

City **Rolla** State **MO** Zip Code **65402-0609**

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

Name of Employer **Anderson Foot Clinic** Occupation **Manager**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : AD00BE6583D914BB1A39**

Amount of Each Receipt this Period  
**250.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan G Traub**

Mailing Address 1725 Stonebridge Road

City	State	Zip Code
Alexandria	VA	22304-1038

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

Name of Employer	Occupation
Deloitte Tax LLP	Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 17 / 2015

**Transaction ID : AA7874B55797B4EDD8C3**

Amount of Each Receipt this Period

500.00

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

Mailing Address PO Box 516

City	State	Zip Code
Vichy	MO	65580-0516

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

Name of Employer	Occupation
homemaker	Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 16 / 2015

**Transaction ID : AF3D90C1977DA474A98C**

Amount of Each Receipt this Period

500.00

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

Mailing Address 22326 County Road 780

City	State	Zip Code
Bernie	MO	63822-7240

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

Name of Employer	Occupation
Self Employed	Rice Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AFEEA378731464FBD854**

Amount of Each Receipt this Period

1000.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory Nickerson**

Mailing Address 11215 Marwood Hill Drive

City Potomac State MD Zip Code 20854-1241

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

Name of Employer Washington Tax & Public Policy Group Occupation Founder & Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : AE302F675808E427095E**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 201 Kramer Dr

City Sikeston State MO Zip Code 63801-4748

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

Name of Employer Self Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A79F2B2A8E1A047E79A2**

Amount of Each Receipt this Period  
**1700.00**

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

Mailing Address PO Box 903

City West Plains State MO Zip Code 65775-0903

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

Name of Employer Beard Law Firm Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : AF6F05A572EBD43008B8**

Amount of Each Receipt this Period  
**250.00**

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

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

**2450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Josh Rice**

Mailing Address **PO Box 133**

City **Naylor** State **MO** Zip Code **63953-0133**

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

Name of Employer **R&W MFG** Occupation **Maunufacturing**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : A879938A70B2B49CF860**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **PO Box 68**

City **Gainesville** State **MO** Zip Code **65655-0068**

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

Name of Employer **Century Bank of the Ozarks** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : A38C0BC32DC0243EEBA0**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **2717 Peach Tree Street**

City **Cape Girardeau** State **MO** Zip Code **63701-3643**

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

Name of Employer **Self Employed** Occupation **Neuro Surgeon**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2015**

**Transaction ID : A7E78B45743D7492F9BE**

Amount of Each Receipt this Period  
**500.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary A Smith**

Mailing Address 40696 Highway 72

City Salem State MO Zip Code 65560-8797

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

Name of Employer Self Employed Occupation Smith's Kennel

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A88AB942B11E54866907**

Amount of Each Receipt this Period  
 340.00

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

Mailing Address 501 Windwood Lake Drive

City Cape Girardeau State MO Zip Code 63701-4932

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

Name of Employer Tri-State Water Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A06901F17C4D04C99950**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 919

City Steelville State MO Zip Code 65565-0919

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

Name of Employer Steeleville Manufacturing Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 17 / 2015

**Transaction ID : A74E66051F1A049B9A22**

Amount of Each Receipt this Period  
 1000.00

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

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

2340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Schuerenberg**

Mailing Address 1023 N Kingshighway St

City State Zip Code  
Sikeston MO 63801-4746

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

Name of Employer Self Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : A9B9D0773D210461AB88**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 748

City State Zip Code  
Salem MO 65560-0748

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

Name of Employer Town & Country Corp. Occupation Vice Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A2D288A3CFCBF43C48FA**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 398

City State Zip Code  
Wyatt MO 63882-0398

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : A359BC4A16DE2434E865**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roy Pfautch**

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108-1242

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

Name of Employer Civic Service, Inc. Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : ABB37A18E63114AA6BAA**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1707 Valley Avenue

City Mc Lean State VA Zip Code 22101-4721

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

Name of Employer Horizon Government Affairs Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A29E2C8F324414823885**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10 Sunningdale Drive

City Saint Louis State MO Zip Code 63124-1624

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

Name of Employer Maritz Holdings Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A3EA9A082D6414F8B8EB**

Amount of Each Receipt this Period  
2700.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 30 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marjorie Deimund**

Mailing Address 3022 Beaver Creek Drive

City State Zip Code  
Cape Girardeau MO 63701-1702

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

Name of Employer Information Requested Occupation  
Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AA3913AE1ED2749D6B2D**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 9911 Oak Branch Drive

City State Zip Code  
Vienna VA 22181-5333

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

Name of Employer Information Requested Occupation  
Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AC28D893666754B69AEE**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 507 Capitol Court NE #100

City State Zip Code  
Washington DC 20002-7705

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

Name of Employer Information Requested Occupation  
Total Spectrum Managing Director

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : A1018E8F3FB9349C990A**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tonie Cahill**

Mailing Address 5270 E Highway 32

City Salem State MO Zip Code 65560-7762

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

Name of Employer Self-employed Occupation Construction Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2015

**Transaction ID : ACF24256664994553BEB**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 846 White Diamond Court

City Springfield State MO Zip Code 65809-1515

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

Name of Employer Function Fifteen Software Occupation Software Designer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AA047FB740CB447C1A67**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 846 White Diamond Court

City Springfield State MO Zip Code 65809-1515

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

Name of Employer Function Fifteen Software Occupation Software Designer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A2E079B75882D4C81ACD**

Amount of Each Receipt this Period  
 300.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Robinson**

Mailing Address 407 E Cinque Hommes Drive

City Perryville State MO Zip Code 63775-3229

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

Name of Employer Robinson Construction Occupation Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : A2A21EE3AB4D1457F80A**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 717

City Seymour State MO Zip Code 65746-0717

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

Name of Employer Precision Tent Rental LLC Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 01 / 2015

**Transaction ID : AC20A27CC87714ED4B90**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 244 Bent Walnut Lane

City Westphalia State MO Zip Code 65085-2022

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 11 / 2015

**Transaction ID : A32F839D1ACDA418EBE6**

Amount of Each Receipt this Period  
 5400.00

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

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

6900.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rex Sinquefield**

Mailing Address **244 Bent Walnut Lane**

City **Westphalia** State **MO** Zip Code **65085-2022**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 11 / 2015**

**Transaction ID : AD94C1780A9D448AC925**

Amount of Each Receipt this Period  
**-2700.00**

Reattribution From

**[MEMO ITEM]**

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

Mailing Address **244 Bent Walnut Lane**

City **Westphalia** State **MO** Zip Code **65085-2022**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 11 / 2015**

**Transaction ID : A4A299904B72B4B8E83B**

Amount of Each Receipt this Period  
**2700.00**

Reattribution To

**[MEMO ITEM]**

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

Mailing Address **244 Bent Walnut Lane**

City **Westphalia** State **MO** Zip Code **65085-2022**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 11 / 2015**

**Transaction ID : A3B464F3A47BC434DB13**

Amount of Each Receipt this Period  
**4600.00**

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

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

**4600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rex Sinquefield**

Mailing Address **244 Bent Walnut Lane**

City **Westphalia** State **MO** Zip Code **65085-2022**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2015**

**Transaction ID : A06744987941A4785AA3**

Amount of Each Receipt this Period  
**-2300.00**

Reattribution From

**[MEMO ITEM]**

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

Mailing Address **244 Bent Walnut Lane**

City **Westphalia** State **MO** Zip Code **65085-2022**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2015**

**Transaction ID : A8FF84208592F4CEE86D**

Amount of Each Receipt this Period  
**2300.00**

Reattribution To

**[MEMO ITEM]**

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

Mailing Address **5426 Highway 19**

City **Cuba** State **MO** Zip Code **65453-7193**

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

Name of Employer **McGinnis Wood Products** Occupation **Chairman**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2015**

**Transaction ID : AB6F63C33ABF8431796F**

Amount of Each Receipt this Period  
**2770.00**

Reattribution to spouse

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

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

**2770.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leroy McGinnis**

Mailing Address 5426 Highway 19

City State Zip Code  
Cuba MO 65453-7193

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

Name of Employer Occupation  
McGinnis Wood Products Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A649715325B2B4586980**

Amount of Each Receipt this Period  
-70.00

Reattribution From

**[MEMO ITEM]**

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

Mailing Address 5426 Highway 19

City State Zip Code  
Cuba MO 65453-7193

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

Name of Employer Occupation  
McGinnis Wood Products Secretary

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
70.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : A58CA469DE0374B34833**

Amount of Each Receipt this Period  
70.00

Reattribution from Spouse

**[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

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

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

0.00

81910.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 98
	<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	

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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Rental Association PAC**

Mailing Address 1900 9th St

City Moline State IL Zip Code 61265-4738

FEC ID number of contributing federal political committee. **C** C00107615

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : AAC72B66907FE44C6BF0**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1150 17th Street NW Suite 601

City Washington State DC Zip Code 20036-4603

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2015

**Transaction ID : A3BA108F84AB24E5CA2E**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**KCPL Power PAC - Federal (Kansas City Power & Light)**

Mailing Address PO Box 418679

City Kansas City State MO Zip Code 64141-9679

FEC ID number of contributing federal political committee. **C** C00111310

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AEF587C0F433C4E5BA16**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 37 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Academy of Dermatology Association PAC**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C C00359539**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : AFC1CD25F635D40A6AC8**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Crop Insurance Professionals Association PAC**

Mailing Address 228 S Washington St

City Alexandria State VA Zip Code 22314-5408

FEC ID number of contributing federal political committee. **C C00503680**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A37F0CCFCE2DC4903BB6**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 101 Constitution Avenue NW  
Suite 500 W

City Washington State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A2B604943CFC54E92A13**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 38 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Political Action Committee**

Mailing Address 5959 Las Colinas Blvd

City Irving State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C** C00095406

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2015

**Transaction ID : A20A191FB44AE4B04AB5**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Morgan Stanley Political Action Committee**

Mailing Address 1585 Broadway

City New York State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : AEF2F23E089D3401AB3E**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Turkey Federation PAC**

Mailing Address 1225 New York Avenue NW  
Suite 400

City Washington State DC Zip Code 20005-6404

FEC ID number of contributing federal political committee. **C** C00076182

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A494491F398C34C22AFD**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees' Political Action Committee**

Mailing Address 2121 Crystal Dr

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : A754DFE5BE021458AA53**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Emerson Electric Company Responsible Government Fund**

Mailing Address 8000 W Florissant Avenue

City State Zip Code  
Saint Louis MO 63136-1414

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AF13630DFFADE4F1FB37**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address 100 NE Adams Street

City State Zip Code  
Peoria IL 61629-0001

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AAFCA8C5242524D52B0D**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

A. Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AC31777E62C404266ACB**

Amount of Each Receipt this Period  
 1000.00

B. Full Name (Last, First, Middle Initial)  
**The Home Depot Inc. Political Action Committee**

Mailing Address 1155 F Street NW Suite 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : AA3CA3E302D6145D787D**

Amount of Each Receipt this Period  
 2500.00

C. Full Name (Last, First, Middle Initial)  
**Centene Corporation Political Action Committee**

Mailing Address 7711 Carondelet Ave

City Saint Louis State MO Zip Code 63105-3313

FEC ID number of contributing federal political committee. **C C00397851**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : A06FEDA559EF14BAE9D2**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 98
	<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)  
**Jason Smith for Congress**

**A. National Emergency Medicine Political Action Committee (NEMPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 2121 K St NW

City Washington State DC Zip Code 20037-1886

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AD83BC24A1DB448B389E**

Amount of Each Receipt this Period  
 1000.00

**B. Koch Industries Inc Political Action Committee (kochpac)**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 14th Street NW Suite 800

City Washington State DC Zip Code 20005-2099

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2015

**Transaction ID : ADED02A3AD4634CACB44**

Amount of Each Receipt this Period  
 1000.00

**C. Charter Communications, Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1919 Pennsylvania Avenue NW

City Washington State DC Zip Code 20006-3400

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A4B76523C67D74A5DB0E**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 42 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

A. Full Name (Last, First, Middle Initial)  
**The Home Depot Inc. Political Action Committee**

Mailing Address 1155 F Street NW  
Suite 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A7E7FC0BBB18B4895A8E**

Amount of Each Receipt this Period  
 500.00

B. Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036-3902

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : A5F3B8CE1B23441A79E4**

Amount of Each Receipt this Period  
 1000.00

C. Full Name (Last, First, Middle Initial)  
**Noranda Intermediate Holdings Corp PAC**

Mailing Address 801 Crescent Centre Drive  
Suite 600

City Franklin State TN Zip Code 37067-7202

FEC ID number of contributing federal political committee. **C C00468876**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A08D4049E8D4D4E8D85D**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 43 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pacific Life Political Action Committee**

Mailing Address 700 Newport Center Dr

City State Zip Code  
Newport Beach CA 92660-6307

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2015

**Transaction ID : A0A37038FDB72444EAA1**

Amount of Each Receipt this Period  
 3000.00

**B.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBCUniversal PAC**

Mailing Address 1701 John F Kennedy Blvd

City State Zip Code  
Philadelphia PA 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A65B8E21C12C24C099F8**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1 City Center  
Suite 300

City State Zip Code  
Saint Louis MO 63101-1883

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 02 / 2015

**Transaction ID : A0CE89AE87A21452A965**

Amount of Each Receipt this Period  
 1000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 44 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Crystal Sugar Company PAC**

Mailing Address 101 3rd Street N

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : A2E29A779FEE14D9B8D1**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**The Boeing Company Political Action Committee**

Mailing Address 929 Long Bridge Drive

City Arlington State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AE897781AD70A4394B2F**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Enrolled Agents PAC**

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3953

FEC ID number of contributing federal political committee. **C** C00415372

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : AFE96EEAAC9CD403B813**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 98
	<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	

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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Veterinary Medical Association PAC (AVMA)**

Mailing Address 1910 Sunderland PI NW

City Washington State DC Zip Code 20036-1608

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AB0FE883C0AB045FFAA4**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Association PAC**

Mailing Address 1101 King Street Suite 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2015

**Transaction ID : A80D3AEB0013642709EB**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Independent Insurance Agents & Brokers PAC**

Mailing Address 412 1st Street SE Suite 300

City Washington State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : A19BB0CA4642D488CA19**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ameren Federal PAC**

Mailing Address 1331 Pennsylvania Avenue NW  
Suite 550 S

City Washington State DC Zip Code 20004-1776

FEC ID number of contributing federal political committee. **C C00206136**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A52A0CE4591A542C5932**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Liberty Mutual Insurance Co PAC**

Mailing Address 175 Berkeley St

City Boston State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : ADF32E6B7A6BF4DF8998**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Express Scripts Political Action Committee**

Mailing Address 1 Express Way

City Saint Louis State MO Zip Code 63121-1824

FEC ID number of contributing federal political committee. **C C00365072**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : ACBB9B54715DD4170A90**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 98
	<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	

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)  
**Jason Smith for Congress**

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

Mailing Address 316 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1146

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A9C3357E972954CCFB87**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Sprint Corporation Political Action Committee**

Mailing Address 12502 Sunrise Valley Dr

City Reston State VA Zip Code 20191-3438

FEC ID number of contributing federal political committee. **C C00089342**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : A6E6AA63620724565B2C**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Coca-Cola Company PAC**

Mailing Address 800 Connecticut Ave NW

City Washington State DC Zip Code 20006-2735

FEC ID number of contributing federal political committee. **C C00347989**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AE777E3978A8448EB83A**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 98  
(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)  
**Jason Smith for Congress**

**A. National Association Of Real Estate Investment Trusts, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1875 I St NW  
 City Washington State DC Zip Code 20006-5413  
 FEC ID number of contributing federal political committee. **C C00303339**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2015  
**Transaction ID : A3EC16FAA885F40C5A67**  
 Amount of Each Receipt this Period  
 2500.00

**B. National Telecommunications Coop Assoc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4121 Wilson Boulevard  
 City Arlington State VA Zip Code 22203-1839  
 FEC ID number of contributing federal political committee. **C C00004473**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2015  
**Transaction ID : AD0B10B715EF148C1992**  
 Amount of Each Receipt this Period  
 5000.00

**C. Western Peanut Growers PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Massachusetts Ave NW  
 c/o McLeod, Watkins & Miller  
 City Washington State DC Zip Code 20001-1401  
 FEC ID number of contributing federal political committee. **C C00254847**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015  
**Transaction ID : AAFAA5387DD344ECF864**  
 Amount of Each Receipt this Period  
 500.00

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

8000.00



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

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

FOR LINE NUMBER: PAGE 49 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Panhandle Peanut Growers PAC**

Mailing Address PO Box 361

City Wellington State TX Zip Code 79095-0361

FEC ID number of contributing federal political committee. **C C00382507**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : AE251909FDC784CC4936**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 800 N Lindbergh Boulevard

City Saint Louis State MO Zip Code 63167-1000

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : AE30D6BDBBF134425A6A**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 101 Constitution Avenue NW  
Suite 400

City Washington State DC Zip Code 20001-2133

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : AB052BFDB2784498BA95**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 50 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Akin Gump PAC (AGSH&F)**

Mailing Address 1333 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1500

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : A6293DA3338B84192BFB**

Amount of Each Receipt this Period  
 750.00

**B.** Full Name (Last, First, Middle Initial)  
**New York Life Insurance Company Political Action Committee**

Mailing Address 51 Madison Avenue  
Room 1109

City New York State NY Zip Code 10010-1603

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A1105BDA4E79341E8B3D**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Snake River Sugar Company PAC**

Mailing Address 2427 Lincoln Ave

City Ogden State UT Zip Code 84401-1305

FEC ID number of contributing federal political committee. **C C00326389**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A641FFFD483054FAD888**

Amount of Each Receipt this Period  
 1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Missourians for Tim Jones**

Mailing Address **PO Box 434**

City **Eureka** State **MO** Zip Code **63025-0434**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 25 / 2015**

**Transaction ID : A6B987F0DF83B4BDF832**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Union Pacific Corporation Fund for Effective Government**

Mailing Address **600 13th Street NW  
Suite 340**

City **Washington** State **DC** Zip Code **20005-3012**

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 12 / 2015**

**Transaction ID : ADD017D2551824983A4C**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Nationwide Mutual Insurance Company Financial and Investments PAC**

Mailing Address **1 Nationwide Plz**

City **Columbus** State **OH** Zip Code **43215-2226**

FEC ID number of contributing federal political committee. **C C00406215**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 26 / 2015**

**Transaction ID : A805D27C2FC514F64A18**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

A. Full Name (Last, First, Middle Initial)  
**National Corn Growers Association PAC (CornPAC)**

Mailing Address **20 F St NW**

City **Washington** State **DC** Zip Code **20001-6707**

FEC ID number of contributing federal political committee. **C C00376343**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : ABCCF52C6BC004B93A51**

Amount of Each Receipt this Period  
 1000.00

B. Full Name (Last, First, Middle Initial)  
**Association For Advanced Life Underwriting Pac (AALU Pac)**

Mailing Address **11921 Freedom Dr Ste 1100**

City **Reston** State **VA** Zip Code **20190-5634**

FEC ID number of contributing federal political committee. **C C00447565**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2015**

**Transaction ID : A836ED1BFDDBE04DACA8E**

Amount of Each Receipt this Period  
 2000.00

C. Full Name (Last, First, Middle Initial)  
**The Goldman Sachs Group, Inc. Political Action Committee**

Mailing Address **101 Constitution Avenue NW Suite 1000E**

City **Washington** State **DC** Zip Code **20001-2171**

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2015**

**Transaction ID : ACC0247F1DEE243BA907**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 98
	<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)  
**Jason Smith for Congress**

**A. National Multifamily Housing Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 M St NW  
 City Washington State DC Zip Code 20036-5816  
 FEC ID number of contributing federal political committee. **C** C00130773  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015  
**Transaction ID : A751D5A47D9B74DE7B88**  
 Amount of Each Receipt this Period  
 3000.00  
 5000.00

**B. National Cotton Council Committee For Advancement Of Cotton PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 2995  
 City Cordova State TN Zip Code 38088-2995  
 FEC ID number of contributing federal political committee. **C** C00023028  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015  
**Transaction ID : A6D18213FD04E467BA40**  
 Amount of Each Receipt this Period  
 1000.00

**C. Friends of Dugger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 275  
 City Hartville State MO Zip Code 65667-0275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2015  
**Transaction ID : A4EA1C813A3E443C5992**  
 Amount of Each Receipt this Period  
 1000.00

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

5000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 800 10th St NW  
Two CityCenter, Suite 400

City Washington State DC Zip Code 20001-5188

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : AC6646D0AD3D746D1A48**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union National Association**

Mailing Address 601 Pennsylvania Avenue NW  
South Building, Suite 600

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015

**Transaction ID : ACCBA7EA82471438B81E**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Soybean Association PAC**

Mailing Address 600 Pennsylvania Avenue SE  
Suite 320

City Washington State DC Zip Code 20003-6300

FEC ID number of contributing federal political committee. **C C00408468**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A6FDB8685A9144F13912**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Sugar Cane League PAC**

Mailing Address **PO Box 938**

City **Thibodaux** State **LA** Zip Code **70302-0938**

FEC ID number of contributing federal political committee. **C C00081414**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2015**

**Transaction ID : AF0CC5226182C4190AC0**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address **101 Constitution Avenue NW  
Suite 500 W**

City **Washington** State **DC** Zip Code **20001-2133**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2015**

**Transaction ID : A295EC913AC964DBEAB3**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Noranda Intermediate Holdings Corp PAC**

Mailing Address **801 Crescent Centre Drive  
Suite 600**

City **Franklin** State **TN** Zip Code **37067-7202**

FEC ID number of contributing federal political committee. **C C00468876**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : AF01000F8006049FE919**

Amount of Each Receipt this Period  
 2700.00

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

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

5700.00

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

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

FOR LINE NUMBER: PAGE 56 OF 98  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A. National Cotton Council Committee For Advancement Of Cotton PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 2995  
 City Cordova State TN Zip Code 38088-2995  
 FEC ID number of contributing federal political committee. **C C00023028**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : AF67DE1F4EECD4B58872**  
 Amount of Each Receipt this Period  
**1000.00**

**B. NextEra Energy Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 Universe Blvd.  
 City North Palm Beach State FL Zip Code 33408-2657  
 FEC ID number of contributing federal political committee. **C C00064774**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2015  
**Transaction ID : A3581E7AEFBB54E989CE**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Ameren Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1331 Pennsylvania Avenue NW Suite 550 S  
 City Washington State DC Zip Code 20004-1776  
 FEC ID number of contributing federal political committee. **C C00206136**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015  
**Transaction ID : AFC7A6F4B0FDC4BB1953**  
 Amount of Each Receipt this Period  
**1000.00**

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

**3000.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 98
	<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	

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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
National Rural Electric Cooperative Association Action Committee for Rural Electrification PAC

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : A482DB57F12F543B8BD3**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1331 Pennsylvania Avenue NW  
Suite 550 S

City State Zip Code  
Washington DC 20004-1776

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : AD08ED2CEF816418EB36**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
National Cattlemen's Beef Association PAC

Mailing Address 1301 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004-1701

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A04E6AF1BD63943F7AC4**

Amount of Each Receipt this Period  
2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 98
	<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	

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)  
**Jason Smith for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Anheuser-Busch PAC**

Mailing Address 1401 I Street NW  
Suite 200

City Washington State DC Zip Code 20005-6549

FEC ID number of contributing federal political committee. **C C00034488**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : A8EBCD674FD1E422F842**

Amount of Each Receipt this Period  
**2500.00**

**B. Full Name (Last, First, Middle Initial)**  
**The Home Depot Inc. Political Action Committee**

Mailing Address 1155 F Street NW  
Suite 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : ADFBAF7C51B0E49188E8**

Amount of Each Receipt this Period  
**500.00**

**C. Full Name (Last, First, Middle Initial)**  
**General Motors Company Political Action Committee (GM PAC)**

Mailing Address 25 Massachusetts Ave NW

City Washington State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : A62A70F0401824771973**

Amount of Each Receipt this Period  
**500.00**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Doe Run Political Action Committee**

Mailing Address 1801 Park 270 Drive  
Suite 300

City Saint Louis State MO Zip Code 63146-4023

FEC ID number of contributing federal political committee. **C C00552109**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : A49EC3928683945A2BD3**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**California Dairies Federal PAC**

Mailing Address 475 S Tegner Rd

City Turlock State CA Zip Code 95380-9406

FEC ID number of contributing federal political committee. **C C00349746**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015

**Transaction ID : AC407FC43C58A46B39EE**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**United Technologies Political Action Committee**

Mailing Address 1101 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2015

**Transaction ID : A6CA8E7A689CE4C26AC1**

Amount of Each Receipt this Period  
 1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 98
	<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)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 1061 American Ln

City Schaumburg State IL Zip Code 60173-4973

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2015

**Transaction ID : A2EAF4A7B02634C838DE**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Mining Association COALPAC**

Mailing Address 101 Constitution Avenue NW  
Suite 500 E

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00109819**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 06 / 2015

**Transaction ID : A3FE983E8B2C5451F892**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 1201 N Orange St

City Wilmington State DE Zip Code 19801-1186

FEC ID number of contributing federal political committee. **C C00563759**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2015

**Transaction ID : A755776024EE2438691A**

Amount of Each Receipt this Period  
 250.00

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

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

4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 98
	<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)  
**Jason Smith for Congress**

**A. DRS Technologies - Good Government Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 2345 Crystal Drive  
Suite 915

City State Zip Code  
Arlington VA 22202-4802

FEC ID number of contributing federal political committee. **C C00275123**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2015

**Transaction ID : A4CFBCC8F562648B0B4E**

Amount of Each Receipt this Period  
2000.00

**B. Nossaman LLP Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1666 K St NW

City State Zip Code  
Washington DC 20006-1218

FEC ID number of contributing federal political committee. **C C00473652**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2015

**Transaction ID : A2EAD6FFA25DC45C8A12**

Amount of Each Receipt this Period  
500.00

**C. Cerner Corporation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2800 Rockcreek Parkway

City State Zip Code  
Kansas City MO 64117-2521

FEC ID number of contributing federal political committee. **C C00410589**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2015

**Transaction ID : A9CC7AB1FE64F4211B50**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 98
	<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)  
**Jason Smith for Congress**

**A. Friends of Kathy Swan**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 36  
City Cape Girardeau State MO Zip Code 63702-0036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015  
**Transaction ID : A6E0ECF5D1F504CE2877**  
Amount of Each Receipt this Period  
500.00

**B. Majority Committee PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 10134  
City Bakersfield State CA Zip Code 93389-0134  
FEC ID number of contributing federal political committee. **C** C00428052  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2015  
**Transaction ID : AA6602689AA52450CBE8**  
Amount of Each Receipt this Period  
5000.00

**C. Monsanto Citizenship Fund**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 N Lindbergh Boulevard  
City Saint Louis State MO Zip Code 63167-1000  
FEC ID number of contributing federal political committee. **C** C00042069  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 12 / 2015  
**Transaction ID : AFEF39DB9748944FF9CB**  
Amount of Each Receipt this Period  
1000.00

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

6500.00

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

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

FOR LINE NUMBER: PAGE 63 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A. Scalise For Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 23219  
 City State Zip Code  
 New Orleans LA 70183-0219  
 FEC ID number of contributing federal political committee. **C C00394957**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2015  
**Transaction ID : A32273482671B4657A99**  
 Amount of Each Receipt this Period  
 2000.00

**B. National Association of Health Underwriters PAC (NAHU)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1212 New York Ave NW  
 City State Zip Code  
 Washington DC 20005-3987  
 FEC ID number of contributing federal political committee. **C C00283135**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2015  
**Transaction ID : A5BC08A8A8207498A816**  
 Amount of Each Receipt this Period  
 1000.00

**C. 3M Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 15th St NW  
 City State Zip Code  
 Washington DC 20005-5002  
 FEC ID number of contributing federal political committee. **C C00084475**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015  
**Transaction ID : A85DDE5E02AA543BA906**  
 Amount of Each Receipt this Period  
 1000.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 98
	<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)  
**Jason Smith for Congress**

**A. General Motors Company Political Action Committee (GM PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 25 Massachusetts Ave NW

City Washington State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : ACB58FA139732403E80D**

Amount of Each Receipt this Period  
2000.00

**B. National Association of Insurance and Financial Advisors PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2015

**Transaction ID : A92BB40AFCE7948699AA**

Amount of Each Receipt this Period  
2000.00

**C. Gridiron PAC c/o National Football League**

Full Name (Last, First, Middle Initial)  
Mailing Address 345 Park Ave

City New York State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2015

**Transaction ID : AC8E468272AEE481C940**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 98
	<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)  
**Jason Smith for Congress**

**A. Society of Independent Gasoline Marketers of America PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 3930 Pender Dr

City State Zip Code  
Fairfax VA 22030-0986

FEC ID number of contributing federal political committee. **C C00120030**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : A750D8C0D245E4F1EBEB**

Amount of Each Receipt this Period  
750.00

**B. Union Pacific Corporation Fund for Effective Government**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 13th Street NW  
Suite 340

City State Zip Code  
Washington DC 20005-3012

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

**Transaction ID : A1AA10CA3BF534624911**

Amount of Each Receipt this Period  
1000.00

**C. Prosperity Action Inc PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1006 Pendleton St

City State Zip Code  
Alexandria VA 22314-1837

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4687.40

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 21 / 2015

**Transaction ID : A001EB86C732C48D8884**

Amount of Each Receipt this Period  
4687.40  
In-kind:In Kind

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

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

6437.40

142337.40

**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 66 OF 98
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Smith Victory**

Mailing Address 824 S Milledge Ave  
Ste 101

City Athens State GA Zip Code 30605-1332

FEC ID number of contributing federal political committee. **C** C00573436

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12244.45

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A680AA39444A849E3AC0**

Amount of Each Receipt this Period  
7287.60

JFC Transfer; See Memo Contributions for Mary Beth Kapp and Colby Robertson

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

Mailing Address 543 Deer Creek Road

City Cape Girardeau State MO Zip Code 63701-9254

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

Name of Employer Occupation  
Self Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A0C6BABCC0E604A25B07**

Amount of Each Receipt this Period  
2700.00

Smith Victory JFC Transfer Memo Contribution  
**[MEMO ITEM]**

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

Mailing Address 543 Deer Creek Road

City Cape Girardeau State MO Zip Code 63701-9254

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

Name of Employer Occupation  
Self Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : AAB408189E3044E449A9**

Amount of Each Receipt this Period  
2700.00

Smith Victory JFC Transfer Memo Contribution  
**[MEMO ITEM]**

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

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

7287.60

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

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

FOR LINE NUMBER: PAGE 67 OF 98  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Colby Robertson**

Mailing Address 1909 S Westwood Boulevard

City State Zip Code  
Poplar Bluff MO 63901-6121

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

Name of Employer Occupation  
Robertson Construction Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : A22AB2B156DB04733852**

Amount of Each Receipt this Period  
 2500.00

Smith Victory JFC Transfer Memo Contribution

**[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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

7287.60

**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 68 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Victory Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 5200 30th Street SW Suite 7		Amount of Each Disbursement this Period 402.05 <b>Transaction ID : B9A1C9D4DB9B244FA8EB</b>
City Davenport	State IA Zip Code 52802-3039	
Purpose of Disbursement Lapel Stickers Expense	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 43.39 <b>Transaction ID : B5CDBAC9460C946BC851</b>
City Saint Louis	State MO Zip Code 63105-0930	
Purpose of Disbursement Car Rental Expense	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. 1st Community Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 53.31 <b>Transaction ID : B38B43746137C4DD9AB7</b>
City Carol Stream	State IL Zip Code 60197-4512	
Purpose of Disbursement Uber Travel	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	498.75
<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 69 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. J Marie's Flowers and Boutique</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 149 W Yoakum Avenue		Amount of Each Disbursement this Period 62.49 <b>Transaction ID : B4F03DD7F6BD34A10903</b>
City Chaffee State MO Zip Code 63740-1136	Purpose of Disbursement Flowers Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Silver Springs Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 110 N Silver Springs Road		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : BAEA6111F186644CFB78</b>
City Cape Girardeau State MO Zip Code 63701-5076	Purpose of Disbursement Storage Rent Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Debbie Westrich</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 157 County Highway 223		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : B2C231082CE2342FCA3D</b>
City Chaffee State MO Zip Code 63740-9149	Purpose of Disbursement Cleaning Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	292.49
<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 70 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. DSW Industries</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 466.00 <b>Transaction ID : BB15DB9FEB6314B8AA7B</b>
City Cape Girardeau	State MO	
Zip Code 63701-4905	Purpose of Disbursement Rent Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ste. Genevieve Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 51 S 3rd Street		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : BC29A891930454FDE959</b>
City Ste Genevieve	State MO	
Zip Code 63670-1601	Purpose of Disbursement Membership Dues	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. State Farm Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 204 Ferguson Street		Amount of Each Disbursement this Period 109.23 <b>Transaction ID : B16C44C24B6184877860</b>
City Poplar Bluff	State MO	
Zip Code 63901-4900	Purpose of Disbursement Insurance Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	825.23
<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 71 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 164.79 <b>Transaction ID : BFAF5FF636A9B4B1CB8F</b>
City Atlanta	State GA	
Zip Code 30353-6216	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Barklage and Knodell</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 7925 Clayton Road Suite 200		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B1BFE0498065A44F5940</b>
City Saint Louis	State MO	
Zip Code 63117-1344	Purpose of Disbursement Consulting Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2015
Mailing Address 294 Siemers Drive		Amount of Each Disbursement this Period 65.59 <b>Transaction ID : B5815D04046EE4327877</b>
City Cape Girardeau	State MO	
Zip Code 63701-8419	Purpose of Disbursement Office Supplies Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1730.38
<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 72 OF 98	
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2015</b>
Mailing Address <b>PO Box 37941</b>		Amount of Each Disbursement this Period <b>414.28</b> Transaction ID : <b>B5B28205AC45C4F2692D</b>
City <b>Hartford</b> State <b>CT</b> Zip Code <b>06176-7941</b>	Purpose of Disbursement <b>Payroll Tax Expense</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eric Harmon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 24 / 2015</b>
Mailing Address <b>108 Belotta Ct Apartment B</b>		Amount of Each Disbursement this Period <b>30.00</b> Transaction ID : <b>B9113EFA31AD44DED9A3</b>
City <b>Rolla</b> State <b>MO</b> Zip Code <b>65401-8711</b>	Purpose of Disbursement <b>Shipping Expense</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. U S Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 24 / 2015</b>
Mailing Address <b>320 N Frederick Street</b>		Amount of Each Disbursement this Period <b>220.00</b> Transaction ID : <b>B46B65EECCA9B4F1C906</b>
City <b>Cape Girardeau</b> State <b>MO</b> Zip Code <b>63701-9998</b>	Purpose of Disbursement <b>Postal Presort Permit</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>664.28</b>
<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 73 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kinetic 5</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BF6306381B02A4FC6B06</b>
City Springfield	State MO	
Zip Code 65808-3524	Purpose of Disbursement Web Hosting Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Owens Dynamic</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : BFDFAA6C3971E4CF6A59</b>
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Consulting Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 83.52 <b>Transaction ID : B861BC869A4104087BBF</b>
City Saint Louis	State MO	
Zip Code 63105-0930	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2183.52
<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 74 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Missouri Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015		
Mailing Address PO Box 999			Amount of Each Disbursement this Period 85.00		
City Jefferson City	State MO	Zip Code 65108-0999	Transaction ID : <b>BCCAC54502AAC4E6F88C</b>		
Purpose of Disbursement MO Income Tax Withheld		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Ste. Genevieve Chamber of Commerce</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015		
Mailing Address 51 S 3rd Street			Amount of Each Disbursement this Period 25.00		
City Ste Genevieve	State MO	Zip Code 63670-1601	Transaction ID : <b>BCA365EF704BB45ACA8E</b>		
Purpose of Disbursement Food Expense		002 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Charter Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015		
Mailing Address 1620 N Kings Highway Street			Amount of Each Disbursement this Period 307.98		
City Cape Girardeau	State MO	Zip Code 63701-2120	Transaction ID : <b>B47F4ACD87B53457897D</b>		
Purpose of Disbursement Phones, Internet and TV		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	417.98
<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 75 OF 98			
	<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)  
**Jason Smith for Congress**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Jason Smith for Congress

Mailing Address 3635 Ruffin Road  
Floor 3

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 01 / 2015

Amount of Each Disbursement this Period  
25.00

Transaction ID : B90CF510AF69841B3ACB

Category/Type  
001

**B. Jefferson County Republican Central Committee**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 284

City High Ridge State MO Zip Code 63049-0284

Purpose of Disbursement  
Meals

Candidate Name  
Jefferson County Republican Central Committee

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 01 / 2015

Amount of Each Disbursement this Period  
105.00

Transaction ID : B48557059852D4588BDD

Category/Type  
002

**c. Sam's Club**

Full Name (Last, First, Middle Initial)

Mailing Address 232 Shirley Drive

City Cape Girardeau State MO Zip Code 63701-8478

Purpose of Disbursement  
Congressional Art Event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 01 / 2015

Amount of Each Disbursement this Period  
196.62

Transaction ID : BCE3AA74870DE45D2ABB

Category/Type  
004

**SUBTOTAL** of Disbursements This Page (optional)..... 326.62

**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 76 OF 98			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Begley, Young, Unterreiner and White</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 2103 Themis Street			Amount of Each Disbursement this Period 1881.56 <b>Transaction ID : B525864D53394496C832</b>
City Cape Girardeau	State MO	Zip Code 63701-5123	
Purpose of Disbursement Payroll Expense	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2015
Mailing Address 3635 Ruffin Road Floor 3			Amount of Each Disbursement this Period 150.00 <b>Transaction ID : B9A1D657DA8544E34983</b>
City San Diego	State CA	Zip Code 92123-1880	
Purpose of Disbursement Credit Card Service Fee	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 Congressional Institute</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 1700 Diagonal Road Suite 730			Amount of Each Disbursement this Period 522.60 <b>Transaction ID : B8E4E3A6C3FFD4C8BA7E</b>
City Alexandria	State VA	Zip Code 22314-2843	
Purpose of Disbursement Chief of Staff Retreat	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2554.16
<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 77 OF 98	
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Direct Mail Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 420.00 <b>Transaction ID : B1770A744C77B400EADA</b>
City Clearwater State FL Zip Code 33762-4427	Purpose of Disbursement Postage Expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Washington Tax &amp; Public Policy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 300 New Jersey Avenue, N.W. Suite 601		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : B95C15035D0BA45E2B47</b>
City Washington State DC Zip Code 20001-2080	Purpose of Disbursement Event Room Rent Expense 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Debbie Westrich</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 157 County Highway 223		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : BF7E699A2D5DE4812B83</b>
City Chaffee State MO Zip Code 63740-9149	Purpose of Disbursement Cleaning Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	720.00
<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 78 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 165.22
City Atlanta	State GA Zip Code 30353-6216	
Purpose of Disbursement Telephone Expense	Category/Type 001	Transaction ID : BDCBDCEBFDF0D4255AAE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eric Harmon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 108 Belotta Ct Apartment B		Amount of Each Disbursement this Period 141.25
City Rolla	State MO Zip Code 65401-8711	
Purpose of Disbursement Mileage Expense	Category/Type 002	Transaction ID : BBDBF3C5B46E648CBA67
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DSW Industries</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 466.00
City Cape Girardeau	State MO Zip Code 63701-4905	
Purpose of Disbursement Rent Expense	Category/Type 001	Transaction ID : B3C70CD5D46724D2EA16
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	772.47
<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 79 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Member Lunch Fund, Committee on Ways and Means</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address U.S. House of Representatives 1102 Longworth		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : B4A21B1D7E1BF4F308A8</b>
City Washington State DC Zip Code 20515-0001	Purpose of Disbursement Member lunches, food and beverage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 137.97 <b>Transaction ID : B1880185524F2439E958</b>
City Saint Louis State MO Zip Code 63105-0930	Purpose of Disbursement Car Rental Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kinetic 5</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : B253BE85DE3F845AF841</b>
City Springfield State MO Zip Code 65808-3524	Purpose of Disbursement Web Host Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	937.97
<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 80 OF 98			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. 1st Community Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 943.58 <b>Transaction ID : B2B9DA8B64C004F41B70</b>
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Food and Fuel Expense	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 321.95 <b>Transaction ID : BF177F838B4BF4613A21</b>
City Saint Louis	State MO	
Zip Code 63105-0930	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Begley, Young, Unterreiner and White</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 435.00 <b>Transaction ID : BBF162CB3F01245E5BBE</b>
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Accounting Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	943.58
<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 81 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 250.56 <b>Transaction ID : B565A0E3642FF414BB93</b>
City Saint Louis	State MO	
Zip Code 63105-0930	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B1E4C5647E8054BEF8C9</b>
City San Diego	State CA	
Zip Code 92123-1880	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 1620 N Kings Highway Street		Amount of Each Disbursement this Period 307.98 <b>Transaction ID : B759E05DF33E043549CE</b>
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Phone, Internet and TV	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	583.54
<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 82 OF 98			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Owens Dynamic</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BC4A03835DD2149108C1</b>
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Consulting Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : BE5C7EBF0C1604855A75</b>
City San Diego	State CA	
Zip Code 92123-1880	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Begley, Young, Unterreiner and White</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 2103 Themis Street		Amount of Each Disbursement this Period 1599.39 <b>Transaction ID : B146A0959D1ED476B8E1</b>
City Cape Girardeau	State MO	
Zip Code 63701-5123	Purpose of Disbursement Payroll Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2614.39
<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 83 OF 98		
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Minuteman Press</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 121 E Columbia Street		Amount of Each Disbursement this Period 1550.89 <b>Transaction ID : BBCF18C1A74394464998</b>
City Farmington State MO Zip Code 63640-3104	Purpose of Disbursement Event Mailing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Direct Mail Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 12450 Automobile Boulevard		Amount of Each Disbursement this Period 1266.68 <b>Transaction ID : B0231EEC7D544458BA2F</b>
City Clearwater State FL Zip Code 33762-4427	Purpose of Disbursement Mailer Expense 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Debbie Westrich</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 157 County Highway 223		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : B402C190520EF4522BBF</b>
City Chaffee State MO Zip Code 63740-9149	Purpose of Disbursement Cleaning Expense 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2867.57
<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 84 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eric Harmon</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 108 Belotta Ct Apartment B		Amount of Each Disbursement this Period 105.80 <b>Transaction ID : BB0BE95820C7F4EA2B5B</b>
City Rolla State MO Zip Code 65401-8711	Purpose of Disbursement Mileage Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. 1st Community Bank Visa</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 76.58 <b>Transaction ID : BE59B68522E314E06A45</b>
City Carol Stream State IL Zip Code 60197-4512	Purpose of Disbursement Food and Fuel Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Silver Springs Storage</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2015
Mailing Address 110 N Silver Springs Road		Amount of Each Disbursement this Period 270.00 <b>Transaction ID : B64BF33791680486983E</b>
City Cape Girardeau State MO Zip Code 63701-5076	Purpose of Disbursement Storage Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	452.38
<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 85 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 218.80 <b>Transaction ID : B5F653482695C476BBB4</b>
City Saint Louis	State MO	
Zip Code 63105-0930	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 16230		Amount of Each Disbursement this Period 77.52 <b>Transaction ID : BBAAAAE3023AE49F686A</b>
City Saint Louis	State MO	
Zip Code 63105-0930	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 165.22 <b>Transaction ID : BDCC4E98A1E2C40039A2</b>
City Atlanta	State GA	
Zip Code 30353-6216	Purpose of Disbursement Cell Phone Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	461.54
<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 86 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. DSW Industries</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 101 Farrar Drive		Amount of Each Disbursement this Period 466.00 <b>Transaction ID : B3D7BC3235CB94750958</b>
City Cape Girardeau	State MO	
Zip Code 63701-4905	Purpose of Disbursement Rent Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U S Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 320 N Frederick Street		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : B45166B2C6D9845828AE</b>
City Cape Girardeau	State MO	
Zip Code 63701-9998	Purpose of Disbursement Postage Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address PO Box 37941		Amount of Each Disbursement this Period 674.08 <b>Transaction ID : B09A5B25D3C594E68A15</b>
City Hartford	State CT	
Zip Code 06176-7941	Purpose of Disbursement Payroll Tax Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1238.08
<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 87 OF 98			
	<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)  
**Jason Smith for Congress**

**A. Complete Campaigns**

Full Name (Last, First, Middle Initial)  
Jason Smith for Congress

Mailing Address 3635 Ruffin Road  
Floor 3

City San Diego State CA Zip Code 92123-1880

Purpose of Disbursement Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 17 / 2015

Amount of Each Disbursement this Period: 25.00

Transaction ID : B650C60389A2B437A976

Category/Type: 003

**B. Aristotle International Inc.**

Full Name (Last, First, Middle Initial)  
Aristotle International Inc.

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Computer Software Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 18 / 2015

Amount of Each Disbursement this Period: 1724.40

Transaction ID : BB68B8ECC39A54B57BC2

Category/Type: 001

**C. Minuteman Press**

Full Name (Last, First, Middle Initial)  
Minuteman Press

Mailing Address 121 E Columbia Street

City Farmington State MO Zip Code 63640-3104

Purpose of Disbursement Event Mailing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 18 / 2015

Amount of Each Disbursement this Period: 4231.94

Transaction ID : B51ED20B9026B4CFB9D6

Category/Type: 003

**SUBTOTAL** of Disbursements This Page (optional) ..... 5981.34

**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 88 OF 98		
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charter Communications</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1620 N Kings Highway Street		Amount of Each Disbursement this Period 312.30 <b>Transaction ID : BD28655BD6BB24DAFBD5</b>
City Cape Girardeau	State MO	
Zip Code 63701-2120	Purpose of Disbursement Phone, Internet & TV Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kinetic 5</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address PO Box 3524		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BCDBB0E0721A343A496A</b>
City Springfield	State MO	
Zip Code 65808-3524	Purpose of Disbursement Web Host Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Josh Haynes</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 2925 Alta Cuesta Drive		Amount of Each Disbursement this Period 125.35 <b>Transaction ID : BA63F2B725754474FA3E</b>
City Cape Girardeau	State MO	
Zip Code 63701-1903	Purpose of Disbursement Mileage Expense	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	537.65
<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 89 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Donna Hickman</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 32 SW Main Street		Amount of Each Disbursement this Period 130.12 <b>Transaction ID : B7207B8E4E7234C76B04</b>
City Bonne Terre	State MO	
Zip Code 63628-1742	Purpose of Disbursement Floral Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Donna Hickman</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 32 SW Main Street		Amount of Each Disbursement this Period 19.60 <b>Transaction ID : B62C8AE59DF424D18A39</b>
City Bonne Terre	State MO	
Zip Code 63628-1742	Purpose of Disbursement Postage Expense Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Owens Dynamic</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address PO Box 1985		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BC0EF817BD9B0462EB2D</b>
City Ozark	State MO	
Zip Code 65721-1985	Purpose of Disbursement Consulting Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1149.72
<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 90 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : B66ED6D859BF44211833</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Service Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 212.50 <b>Transaction ID : B9A723972C7E54E4E8BF</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Service Fee 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Holly Benton</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address HC 62 Box 34		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B8E9D0F0BFD9B4C88B28</b>
City Sedgewickville State MO Zip Code 63781-9503	Purpose of Disbursement Entertainment for Campaign Event 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	542.50
<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 91 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ross Branson</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 15 6th St NE			Amount of Each Disbursement this Period -237.60 <b>Transaction ID : B0137C1377F3E49FF918</b>
City Washington	State DC	Zip Code 20002-6017	
Purpose of Disbursement Void Check for Car Rental Reimbursement		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address PO Box 16230			Amount of Each Disbursement this Period -237.60 <b>Transaction ID : B4DB7C3C09B4D4481A78</b> <b>[MEMO ITEM]</b>
City Saint Louis	State MO	Zip Code 63105-0930	
Purpose of Disbursement Vehicle Rental Expense		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Ross Branson</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 15 6th St NE			Amount of Each Disbursement this Period 186.00 <b>Transaction ID : BBF7D04B955884CBA945</b>
City Washington	State DC	Zip Code 20002-6017	
Purpose of Disbursement Travel Expense: See Below		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-51.60
<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 92 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. 1st Community Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 1553.49 <b>Transaction ID : B51A350E153BB40B2A99</b>
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Travel Expense: See Below	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hotel Phillips</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2015
Mailing Address 106 W 12th Street		Amount of Each Disbursement this Period 421.84 <b>Transaction ID : B111B1702AB8640F493E</b> <b>[MEMO ITEM]</b>
City Kansas City	State MO	
Zip Code 64105-1902	Purpose of Disbursement Lodging	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hotel Phillips</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2015
Mailing Address 106 W 12th Street		Amount of Each Disbursement this Period 442.48 <b>Transaction ID : BFDC686DA713F4337861</b> <b>[MEMO ITEM]</b>
City Kansas City	State MO	
Zip Code 64105-1902	Purpose of Disbursement Lodging	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1553.49
<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 93 OF 98			
	<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)  
**Jason Smith for Congress**

**A. Charter Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address 1620 N Kings Highway Street

City Cape Girardeau State MO Zip Code 63701-2120

Purpose of Disbursement Internet, Phone & Cable

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 26 / 2015

Amount of Each Disbursement this Period: 201.76

Transaction ID : B739E54D25D5E405DB1D

[MEMO ITEM]

**B. 1st Community Bank Visa**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 4512

City Carol Stream State IL Zip Code 60197-4512

Purpose of Disbursement Travel Expense; See Below

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 26 / 2015

Amount of Each Disbursement this Period: 741.49

Transaction ID : B38439057AA3F48B7897

**c. Capitol Hill Club**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement Political Meals Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 15 / 2015

Amount of Each Disbursement this Period: 655.17

Transaction ID : B3053CB12CD45449D88A

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 741.49

**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 94 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Prosperity Action Inc PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 1006 Pendleton St		Amount of Each Disbursement this Period 4687.40 <b>Transaction ID : B001EB86C732C48D8884</b>
City Alexandria	State VA	
Purpose of Disbursement In-kind: In Kind		Category/ Type
Candidate Name <b>Prosperity Action Inc PAC</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Grand Valley Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 213 Ashby Street		Amount of Each Disbursement this Period 25576.50 <b>Transaction ID : B2C9D94C2918749D9B47</b>
City Alexandria	State VA	
Purpose of Disbursement Operational & Strategic: See Below		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Washington Nationals</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 1500 S Capitol Street SE		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : B1721B173578E4E99B9C</b> <b>[MEMO ITEM]</b>
City Washington	State DC	
Purpose of Disbursement Event Expense		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	30263.90
<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 95 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Taylor Gourmet</b>			Date of Disbursement MM / DD / YYYY 04 / 14 / 2015		
Mailing Address 1910 14th Street NW			Amount of Each Disbursement this Period 294.01		
City Washington	State DC	Zip Code 20009-4490	Transaction ID : B5D3BE6B18C4D46EB92F		
Purpose of Disbursement Food Expense		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Washington Nationals</b>			Date of Disbursement MM / DD / YYYY 04 / 15 / 2015		
Mailing Address 1500 S Capitol Street SE			Amount of Each Disbursement this Period 3020.00		
City Washington	State DC	Zip Code 20003-3599	Transaction ID : B5D599209CB4046A98D3		
Purpose of Disbursement Event Expense		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Pork Barrel BBQ</b>			Date of Disbursement MM / DD / YYYY 04 / 22 / 2015		
Mailing Address 2312 Mt. Vernon Avenue			Amount of Each Disbursement this Period 295.15		
City Alexandria	State VA	Zip Code 22301-1320	Transaction ID : B718D8B35A2D045E4B3D		
Purpose of Disbursement Food Expense		Category/ Type 003	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 96 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. NRECA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2015
Mailing Address PO Box 758777		Amount of Each Disbursement this Period 381.30
City Baltimore	State MD	
Zip Code 21275-8777	Purpose of Disbursement Food and Beverage Expense	Transaction ID : <b>BBF28F65917C045EE870</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 1st Community Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address PO Box 4512		Amount of Each Disbursement this Period 761.58
City Carol Stream	State IL	
Zip Code 60197-4512	Purpose of Disbursement Credit Card: See Below	Transaction ID : <b>B0E540B5253914C6FA8E</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. 12 West Bar &amp; Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 12 W Columbia Street		Amount of Each Disbursement this Period 285.14
City Farmington	State MO	
Zip Code 63640-1717	Purpose of Disbursement Political Meal Expense	Transaction ID : <b>B95BB1A7DD71141B2966</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	761.58
<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 97 OF 98			
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Missouri</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 3363 Gordonville Road		Amount of Each Disbursement this Period 125.00
City Cape Girardeau	State MO	
Zip Code 63703-5059	Purpose of Disbursement Telephone Expense	Transaction ID : B91724EB09C60449195D
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Missouri</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 3363 Gordonville Road		Amount of Each Disbursement this Period 216.40
City Cape Girardeau	State MO	
Zip Code 63703-5059	Purpose of Disbursement Telephone Expense	Transaction ID : BDE32F97CD9014AD6926
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Eric Harmon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2015
Mailing Address 108 Belotta Ct Apartment B		Amount of Each Disbursement this Period 129.49
City Rolla	State MO	
Zip Code 65401-8711	Purpose of Disbursement Fundraising Expense: See Below	Transaction ID : BED985D891EEE4748B7F
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	129.49
<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 98 OF 98		
	<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)  
**Jason Smith for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eric Harmon</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2015
Mailing Address 108 Belotta Ct Apartment B		Amount of Each Disbursement this Period 85.83 <b>Transaction ID : B8FED50AA4DB349BD8D4</b>
City Rolla	State MO Zip Code 65401-8711	
Purpose of Disbursement Fundraising Expense; See Below	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	85.83
<b>TOTAL</b> This Period (last page this line number only).....	62780.32