

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
Scott for Congress

ADDRESS (number and street) Post Office Box 251
 Check if different than previously reported. (ACC) Newport News VA 23607

2. **FEC IDENTIFICATION NUMBER** ▼ C00256925 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
VA 03

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 01 / 2015 through 12 / 31 / 2015

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 Sean M Williamson
Signature of Treasurer Sean M Williamson [Electronically Filed] Date M M / D D / Y Y Y Y
01 / 31 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Scott 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))....	58914.34	245865.67
(b) Total Contribution Refunds (from Line 20(d))	0.00	38.46
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58914.34	245827.21
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	51015.24	249872.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51015.24	249872.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	63497.25	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	3191.43	

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

Scott for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11475.00	53067.17
(ii) Unitemized	939.34	11748.50
(iii) TOTAL of contributions from individuals	12414.34	64815.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	46500.00	181050.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	58914.34	245865.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	58914.34	245865.67

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	51015.24	249872.45
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	38.46
(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	38.46
21. OTHER DISBURSEMENTS	41000.00	57000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	92015.24	306910.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	96598.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58914.34
25. SUBTOTAL (add Line 23 and Line 24).....	155512.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	92015.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	63497.25

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

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

FOR LINE NUMBER: PAGE 5 OF 49
(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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Joe S. Frank
 Mailing Address 2 Madison Circle
 City State Zip Code
 Newport News VA 23606-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 David, Kamp & Frank, LLC Attorney
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 05 2015
Transaction ID : C10800644
 Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Sudafi Henry
 Mailing Address 7809 Cole Ave
 City State Zip Code
 Takoma Park MD 20912-7552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 theGroup attorney
 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
 11 17 2015
Transaction ID : C10821132
 Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Robert Johnson
 Mailing Address PO Box 5010
 City State Zip Code
 Monroe CT 06468-8200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 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
 11 18 2015
Transaction ID : C10823756
 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 6 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
James R. Joseph

Mailing Address 2210 Chesapeake Ave

City Hampton State VA Zip Code 23661-3205

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

Name of Employer Harvey Lindsay Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : C10828202

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jason Gregory Noble

Mailing Address 1010 W Marshall St

City Richmond State VA Zip Code 23220-3827

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

Name of Employer Virginia Community University Health S 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 Y
 10 / 23 / 2015

Transaction ID : C10807776

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2014 Madison Ave

City Baltimore State MD Zip Code 21217-3866

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

Name of Employer Global Policy Solutions 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 Y
 11 / 06 / 2015

Transaction ID : C10811181

Amount of Each Receipt this Period
 250.00

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 49
	<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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Darrel Thompson

Mailing Address 1215 1/2 C St NE

City Washington State DC Zip Code 20002-6331

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

Name of Employer theGROUP Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : C10821141

Amount of Each Receipt this Period
 1250.00

Amount of Each Receipt this Period
 1750.00

B. Full Name (Last, First, Middle Initial)
Arthur Collins

Mailing Address 3911 Lorcom Lane

City Arlington State VA Zip Code 22207-5129

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

Name of Employer theGROUP Occupation Business Strategist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : C10825460A

Amount of Each Receipt this Period
 5000.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : C10825460AB

Amount of Each Receipt this Period
 5000.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

6250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
JAMES JONES

Mailing Address 3023 Salters St

City Newport News State VA Zip Code 23607-3727

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

Name of Employer Not employed Occupation Not employed

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
09 / 30 / 2015

Transaction ID : C10800645A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5038.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2015

Transaction ID : C10800645AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 3911 Lorcom Lane

City Arlington State VA Zip Code 22207-5129

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

Name of Employer theGROUP Occupation Business Strategist

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
11 / 30 / 2015

Transaction ID : C10846749

Amount of Each Receipt this Period
-2500.00

[MEMO ITEM]
 * Redesignating half of the total amount of \$5000 to the General election

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

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

25.00

**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 49
	<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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Arthur Collins

Mailing Address 3911 Lorcom Lane

City State Zip Code
Arlington VA 22207-5129

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

Name of Employer Occupation
theGROUP Business Strategist

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
11 / 30 / 2015

Transaction ID : C10846750

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]
* Redesignating half of the total amount of \$5000 to the General election

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

11475.00

**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 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Altria Group Inc. Political Action Committee

Mailing Address 120 Park Avenue

City State Zip Code
New York NY 10017

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
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : C10825564

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION

Mailing Address 777 6th Street, NW
Suite 200

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : C10827004

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
American Dental Political Action Cmte.

Mailing Address 1111 14th St NW
Ste 1100

City State Zip Code
Washington DC 20005-5627

FEC ID number of contributing federal political committee. **C C00000729**

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
12 / 28 / 2015

Transaction ID : C10837052

Amount of Each Receipt this Period
1000.00

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

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
American Federation Of Government Employees' Polit

Mailing Address 80 F St NW

City Washington State DC Zip Code 20001-1528

FEC ID number of contributing federal political committee. **C** C00009936

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
 11 / 30 / 2015

Transaction ID : C10827003

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
American Hospital Association Political Action Com

Mailing Address 325 7th St NW Ste 700

City Washington State DC Zip Code 20004-2801

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10837153

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 Capital One Drive Attn: 19050-1204

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00326595

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
 10 / 21 / 2015

Transaction ID : C10807919

Amount of Each Receipt this Period
 5000.00

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

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

7500.00

**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 49
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. CITIGROUP INC. POLITICAL ACTION COMMITTEE-FEDERAL		Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2015
Mailing Address 1101 Pennsylvania Ave NW Ste 1000		Transaction ID : C10831121
City Washington State DC Zip Code 20004-2523	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00008474	Name of Employer Occupation	Amount of Each Receipt this Period 2500.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. FEDEX CORPORATION POLITICAL ACTION COMMITTEE (FEDEXPAC)		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2015
Mailing Address 942 S SHADY GROVE ROAD		Transaction ID : C10827001
City MEMPHIS State TN Zip Code 38120	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00068692	Name of Employer Occupation	Amount of Each Receipt this Period 1000.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPPAC)		Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2015
Mailing Address 300 M St SE Ste 350		Transaction ID : C10804286
City Washington State DC Zip Code 20003-3436	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00325092	Name of Employer Occupation	Amount of Each Receipt this Period 1000.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 13 OF 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
IATSE LOCAL 30 POLITICAL ACTION COMMITTEE

Mailing Address 1407 E RIVERSIDE DRIVE

City State Zip Code
INDIANAPOLIS IN 46202

FEC ID number of contributing federal political committee. **C** C00400721

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
11 17 2015

Transaction ID : C10823757

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL

Mailing Address 1750 New York Ave. NW
Suite 400

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

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
12 08 2015

Transaction ID : C10827117

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
International Association Of Firefighters Interest

Mailing Address 1750 New York Ave Nw

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

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
12 30 2015

Transaction ID : C10837089

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 14 OF 49
	<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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

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 **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 15 2015

Transaction ID : C10828204

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance Company Politi

Mailing Address **1295 State Street**

City State Zip Code
Springfield MA 01111

FEC ID number of contributing federal political committee. **C C00118943**

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
12 15 2015

Transaction ID : C10828203

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
MORGAN STANLEY POLITICAL ACTION COMMITTEE

Mailing Address **1585 BROADWAY 39TH FLOOR**

City State Zip Code
NEW YORK NY 10036

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 **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : C10827005

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

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

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

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Association

Mailing Address 1101 King Street
Suite 600

City Alexandria State VA Zip Code 22314

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
12 / 17 / 2015

Transaction ID : C10831122

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PEPSICO INC. CONCERNED CITIZENS FUND

Mailing Address 700 ANDERSON HILL ROAD

City PURCHASE State NY Zip Code 10577

FEC ID number of contributing federal political committee. **C C00039321**

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
11 / 16 / 2015

Transaction ID : C10820939

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL FEDERAL PAC)

Mailing Address 751 BROAD STREET
14TH FLOOR

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

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
12 / 17 / 2015

Transaction ID : C10831124

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: PAGE 16 OF 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Scott for Congress

A. Seafarers Political Activity Donation-seafarers In
 Full Name (Last, First, Middle Initial)
 Mailing Address 5201 Auth Way
 City State Zip Code
 Camp Springs MD 20746
 FEC ID number of contributing federal political committee. **C C00004325**
 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
 12 / 02 / 2015
Transaction ID : C10827002
 Amount of Each Receipt this Period
 2500.00

B. Sheet Metal Workers' International Association Pol
 Full Name (Last, First, Middle Initial)
 Mailing Address 1750 New York Ave NW
 City State Zip Code
 Washington DC 20006-5305
 FEC ID number of contributing federal political committee. **C C00007542**
 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
 12 / 08 / 2015
Transaction ID : C10827118
 Amount of Each Receipt this Period
 2500.00

C. SPEED PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2875
 City State Zip Code
 DAYTONA BEACH FL 32120
 FEC ID number of contributing federal political committee. **C C00571042**
 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
 10 / 23 / 2015
Transaction ID : C10809510
 Amount of Each Receipt this Period
 1000.00

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 17 OF 49
	<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)
Scott for Congress

A. Full Name (Last, First, Middle Initial)
Uaw - V - Cap (uaw Voluntary Community Action Prog

Mailing Address 8000 East Jefferson
Attn: Bunn, Elizabeth

City Detroit State MI Zip Code 48214

FEC ID number of contributing federal political committee. **C** C00002840

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
 11 / 06 / 2015

Transaction ID : C10811238

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE

Mailing Address 18354 QUANTICO GATEWAY DR
SUITE 200

City TRIANGLE State VA Zip Code 22172

FEC ID number of contributing federal political committee. **C** C00013342

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
 12 / 17 / 2015

Transaction ID : C10831123

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
United Parcel Service Inc. Political Action Commit

Mailing Address 55 Glenlake Parkway N.e.

City Atlanta State GA Zip Code 30328

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
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : C10837090

Amount of Each Receipt this Period
1500.00

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 18 OF 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

A. Mailing Address 1300 I ST NW
STE 400 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

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
 10 / 13 / 2015

Transaction ID : C10806015

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
WAL PAC

B. Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

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
 12 / 07 / 2015

Transaction ID : C10830129

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)

C. 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).....

2000.00

46500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 99.00 Transaction ID : D773364
City Newport News	State VA	
Purpose of Disbursement Storage 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. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 99.00 Transaction ID : D773442
City Newport News	State VA	
Purpose of Disbursement Storage 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) c. AAAA Storage		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 810-79th Street		Amount of Each Disbursement this Period 99.00 Transaction ID : D774187
City Newport News	State VA	
Purpose of Disbursement Storage 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:		

SUBTOTAL of Disbursements This Page (optional).....	99.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015	
Mailing Address P.O. Box 382110			Amount of Each Disbursement this Period 0.99	
City Cambridge	State MA	Zip Code 02238	Transaction ID : D768920	
Purpose of Disbursement Service fee		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. ACTBLUE			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015	
Mailing Address P.O. Box 382110			Amount of Each Disbursement this Period 0.20	
City Cambridge	State MA	Zip Code 02238	Transaction ID : D769846	
Purpose of Disbursement Service fee		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) C. ACTBLUE			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015	
Mailing Address P.O. Box 382110			Amount of Each Disbursement this Period 197.50	
City Cambridge	State MA	Zip Code 02238	Transaction ID : D771793	
Purpose of Disbursement Service fee		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:				

SUBTOTAL of Disbursements This Page (optional).....	198.69
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 21 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. ACTBLUE			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015	
Mailing Address P.O. Box 382110			Amount of Each Disbursement this Period 0.96	
City Cambridge	State MA	Zip Code 02238	Transaction ID : D771932	
Purpose of Disbursement Service fee		Category/ Type		
Candidate Name				
Office Sought:	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. ACTBLUE			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015	
Mailing Address P.O. Box 382110			Amount of Each Disbursement this Period 0.12	
City Cambridge	State MA	Zip Code 02238	Transaction ID : D772039	
Purpose of Disbursement Service fee		Category/ Type		
Candidate Name				
Office Sought:	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) c. Church View Septic Service, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address 46 Warner Rd			Amount of Each Disbursement this Period 325.50	
City Urbanna	State VA	Zip Code 23175-2410	Transaction ID : D773333	
Purpose of Disbursement Portable Toilets for event		Category/ Type 001		
Candidate Name				
Office Sought:	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:			

SUBTOTAL of Disbursements This Page (optional).....	326.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Continental Society of Richmond			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 8222 Whistler Rd			Amount of Each Disbursement this Period 440.00 Transaction ID : D773468
City Richmond	State VA	Zip Code 23227-1527	
Purpose of Disbursement Sponsorship & tickets		Category/ Type 012	
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. Cox Communications			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address PO Box 183124			Amount of Each Disbursement this Period 95.08 Transaction ID : D773444
City Columbus	State OH	Zip Code 43218-3124	
Purpose of Disbursement Cable		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) C. Cox Communications			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 183124			Amount of Each Disbursement this Period 95.08 Transaction ID : D773366
City Columbus	State OH	Zip Code 43218-3124	
Purpose of Disbursement Cable		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:			

SUBTOTAL of Disbursements This Page (optional).....	630.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address PO Box 183124		Amount of Each Disbursement this Period 95.08
City Columbus	State OH	
Zip Code 43218-3124	Purpose of Disbursement Cable	Transaction ID : D774189
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)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Cynthia Downs-Taylor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1025 Porte Harbour Arch		Amount of Each Disbursement this Period 1000.00
City Hampton	State VA	
Zip Code 23664-1550	Purpose of Disbursement Consulting fee	Transaction ID : D773375
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)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ms. Cynthia Downs-Taylor		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1025 Porte Harbour Arch		Amount of Each Disbursement this Period 1000.00
City Hampton	State VA	
Zip Code 23664-1550	Purpose of Disbursement Consulting fee	Transaction ID : D773449
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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2095.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Erickson and Company			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 38 Ivy St SE			Amount of Each Disbursement this Period 3429.64 Transaction ID : D773446
City Washington	State DC	Zip Code 20003-4006	
Purpose of Disbursement Consulting fee & mailing expenses		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. Erickson and Company			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 38 Ivy St SE			Amount of Each Disbursement this Period 3363.96 Transaction ID : D773371
City Washington	State DC	Zip Code 20003-4006	
Purpose of Disbursement Consulting fee & mailing expenses		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) C. Erickson and Company			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 38 Ivy St SE			Amount of Each Disbursement this Period 3455.20 Transaction ID : D774191
City Washington	State DC	Zip Code 20003-4006	
Purpose of Disbursement Consulting fee & mailing expenses		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:			

SUBTOTAL of Disbursements This Page (optional).....	10248.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 49		
	<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)
Scott for Congress

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 407066

City Fort Lauderdale State FL Zip Code 33340-7066

Purpose of Disbursement Service fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2015

Amount of Each Disbursement this Period: 0.90

Transaction ID : D772964

Category/Type: 001

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 407066

City Fort Lauderdale State FL Zip Code 33340-7066

Purpose of Disbursement Service/Interchange

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2015

Amount of Each Disbursement this Period: 3.31

Transaction ID : D772965

Category/Type: 001

C. First Data

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 407066

City Fort Lauderdale State FL Zip Code 33340-7066

Purpose of Disbursement Service/Discount fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2015

Amount of Each Disbursement this Period: 96.71

Transaction ID : D772966

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 100.92

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		03		2015
M M	/	D D	/	Y Y Y Y									
11		03		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>27.00</td> </tr> </table>		27.00									
27.00													
Purpose of Disbursement Service fee		Transaction ID : D771798											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		03		2015
M M	/	D D	/	Y Y Y Y									
11		03		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>37.80</td> </tr> </table>		37.80									
37.80													
Purpose of Disbursement Service/Interchange		Transaction ID : D771799											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>03</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		03		2015
M M	/	D D	/	Y Y Y Y									
11		03		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>19.95</td> </tr> </table>		19.95									
19.95													
Purpose of Disbursement Service/Discount fee		Transaction ID : D771800											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	84.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		05		2015
M M	/	D D	/	Y Y Y Y									
10		05		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>4.12</td> </tr> </table>		4.12									
4.12													
Purpose of Disbursement Service fee		Transaction ID : D770715											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		05		2015
M M	/	D D	/	Y Y Y Y									
10		05		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>31.80</td> </tr> </table>		31.80									
31.80													
Purpose of Disbursement Service/Interchange		Transaction ID : D770716											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. First Data		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		05		2015
M M	/	D D	/	Y Y Y Y									
10		05		2015									
Mailing Address PO Box 407066		Amount of Each Disbursement this Period											
City State Zip Code Fort Lauderdale FL 33340-7066		<table border="1"> <tr> <td>106.61</td> </tr> </table>		106.61									
106.61													
Purpose of Disbursement Service/Discount fee		Transaction ID : D770717											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	142.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Friends of Gary McCollum		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 3901 Meeting House Rd		Amount of Each Disbursement this Period 500.00 Transaction ID : D773361
City Virginia Beach	State VA Zip Code 23455-7001	
Purpose of Disbursement Donation	Category/Type 011	
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. Greater Southeast Development Corp		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2015
Mailing Address 2101 Jefferson Avenue		Amount of Each Disbursement this Period 231.67 Transaction ID : D773461
City Newport News	State VA Zip Code 23607-4517	
Purpose of Disbursement Young people to Richmond	Category/Type 012	
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) c. Greater Southeast Development Corp		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 2101 Jefferson Avenue		Amount of Each Disbursement this Period 240.00 Transaction ID : D773462
City Newport News	State VA Zip Code 23607-4517	
Purpose of Disbursement Young people to DC	Category/Type 012	
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:		

SUBTOTAL of Disbursements This Page (optional).....	971.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Hampton NAACP		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1108 Mary Peake Blvd		Amount of Each Disbursement this Period 200.00 Transaction ID : D773374
City Hampton	State VA	
Zip Code 23666-4550	Purpose of Disbursement Tickets	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. Hampton NAACP		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1108 Mary Peake Blvd		Amount of Each Disbursement this Period 150.00 Transaction ID : D773378
City Hampton	State VA	
Zip Code 23666-4550	Purpose of Disbursement Ad	Category/ Type 004
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) C. Hampton University Proton Therapy Institute		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 6043		Amount of Each Disbursement this Period 1250.00 Transaction ID : D773363
City Hampton	State VA	
Zip Code 23668-0001	Purpose of Disbursement Gala Tickets	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:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Ms. Joni L. Ivey		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 918 Christopher Pl		Amount of Each Disbursement this Period 199.64 Transaction ID : D773356
City Newport News	State VA	
Purpose of Disbursement Mileage		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. Ivy Baptist Church		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 50 Maple Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : D773369
City Newport News	State VA	
Purpose of Disbursement Back to School Sponsorship & Ice		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) c. Ivy Baptist Church		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 50 Maple Ave		Amount of Each Disbursement this Period 300.00 Transaction ID : D773501
City Newport News	State VA	
Purpose of Disbursement Donation for under privileged kids		Category/ Type 012
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:		

SUBTOTAL of Disbursements This Page (optional).....	749.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Jazz Legacy Foundation		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 3336 Courtney Rd		Amount of Each Disbursement this Period 150.00 Transaction ID : D773439
City Portsmouth	State VA	
Zip Code 23703-4010	Purpose of Disbursement Tickets	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. John Miller for Senate		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 11 Rollingwood Pl c/o John and Sharon Miller		Amount of Each Disbursement this Period 250.00 Transaction ID : D773353
City Newport News	State VA	
Zip Code 23606-2128	Purpose of Disbursement Donation	Category/ Type 011
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) c. Locke For Senate		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address PO Box 3006		Amount of Each Disbursement this Period 360.00 Transaction ID : D773339
City Hampton	State VA	
Zip Code 23663-0006	Purpose of Disbursement Table Tickets	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:	

SUBTOTAL of Disbursements This Page (optional).....	760.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 49	
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Mason for Delegate		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address PO Box 232		Amount of Each Disbursement this Period 250.00 Transaction ID : D773352
City Williamsburg	State VA	
Zip Code 23187-0232	Purpose of Disbursement Donation	Category/ Type 011
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. Mr. Larry Mercado		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 3 Loquat Pl		Amount of Each Disbursement this Period 100.00 Transaction ID : D773447
City Hampton	State VA	
Zip Code 23666-2180	Purpose of Disbursement Accounting service	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) c. Mr. Larry Mercado		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 3 Loquat Pl		Amount of Each Disbursement this Period 200.00 Transaction ID : D774192
City Hampton	State VA	
Zip Code 23666-2180	Purpose of Disbursement Accounting service	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:	

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Ms. Anita Minor		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 5904 Woodland Dr		Amount of Each Disbursement this Period 600.00 Transaction ID : D773463
City Oxon Hill State MD Zip Code 20745-1235	Purpose of Disbursement CBC Catering 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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. New Journal and Guide		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 5127 E Virginia Beach Blvd		Amount of Each Disbursement this Period 500.00 Transaction ID : D773381
City Norfolk State VA Zip Code 23502-3412	Purpose of Disbursement Sponsorship Breakfast 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:	Category/Type	

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D774185
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software Licensing & Web Package 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:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 49	
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. North District Food Drive/Full Circle Foundation		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address PO Box 14037		Amount of Each Disbursement this Period 200.00 Transaction ID : D773509
City Newport News	State VA	
Zip Code 23608-0001	Purpose of Disbursement Donation	Category/ Type 012
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. Portsmouth NAACP		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address PO Box 3878		Amount of Each Disbursement this Period 230.00 Transaction ID : D773379
City Portsmouth	State VA	
Zip Code 23701-0878	Purpose of Disbursement Ad & tickets	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) c. Republic Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address 124 Greene Dr		Amount of Each Disbursement this Period 255.03 Transaction ID : D773340
City Yorktown	State VA	
Zip Code 23692-4800	Purpose of Disbursement Trash container rental	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:	

SUBTOTAL of Disbursements This Page (optional).....	685.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Richmond NAACP Richmond NAACP		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address 214 E Clay St		Amount of Each Disbursement this Period 125.00 Transaction ID : D773348
City Richmond	State VA Zip Code 23219-1341	
Purpose of Disbursement Ad	Category/Type 004	
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. Richmond NAACP Richmond NAACP		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 214 E Clay St		Amount of Each Disbursement this Period 120.00 Transaction ID : D773372
City Richmond	State VA Zip Code 23219-1341	
Purpose of Disbursement Banquet tickets	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) c. Security Metrics		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 1275 W 1600 N		Amount of Each Disbursement this Period 314.96 Transaction ID : D773370
City Orem	State UT Zip Code 84057-2428	
Purpose of Disbursement PCI Compliance	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:		

SUBTOTAL of Disbursements This Page (optional).....	559.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Simonds for Delegate		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address PO Box 1952		Amount of Each Disbursement this Period 250.00 Transaction ID : D773350
City Newport News	State VA	
Zip Code 23601-0952	Purpose of Disbursement Donation	Category/ Type 011
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. Southside Child Development Center		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1420 McDonough St.		Amount of Each Disbursement this Period 500.00 Transaction ID : D773384
City Richmond	State VA	
Zip Code 23224	Purpose of Disbursement Table sponsor	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) c. TSO Newport Maritime, LP The Simpson Organization, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 1401 Peachtree St NE Ste 400		Amount of Each Disbursement this Period 477.71 Transaction ID : D773367
City Atlanta	State GA	
Zip Code 30309-3041	Purpose of Disbursement Rent	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:	

SUBTOTAL of Disbursements This Page (optional).....	1227.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. TSO Newport Maritime, LP The Simpson Organization, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 1401 Peachtree St NE Ste 400		Amount of Each Disbursement this Period 477.71 Transaction ID : D773445
City Atlanta State GA Zip Code 30309-3041	Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) B. TSO Newport Maritime, LP The Simpson Organization, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 1401 Peachtree St NE Ste 400		Amount of Each Disbursement this Period 477.71 Transaction ID : D774186
City Atlanta State GA Zip Code 30309-3041	Purpose of Disbursement Rent	
Candidate Name	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:		

Full Name (Last, First, Middle Initial) c. U.S. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1764.54 Transaction ID : D772967
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Taxes	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2719.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. U.S. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1764.54 Transaction ID : D770719
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Taxes 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. U.S. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address 101 25th St		Amount of Each Disbursement this Period 247.00 Transaction ID : D773460
City Newport News State VA Zip Code 23607-9998	Purpose of Disbursement Business reply & postage 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) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 221.81 Transaction ID : D773334
City Worcester State MA Zip Code 01615-0023	Purpose of Disbursement Cell phone service 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:		

SUBTOTAL of Disbursements This Page (optional).....	2233.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 223.96 Transaction ID : D773510
City Worcester	State MA Zip Code 01615-0023	
Purpose of Disbursement Cell phone service	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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address PO Box 15023		Amount of Each Disbursement this Period 221.77 Transaction ID : D773377
City Worcester	State MA Zip Code 01615-0023	
Purpose of Disbursement Cell phone service	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) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 367.22 Transaction ID : D773365
City Baltimore	State MD Zip Code 21297-0429	
Purpose of Disbursement Office phone	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:		

SUBTOTAL of Disbursements This Page (optional).....	812.95
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 40 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 387.56
City Baltimore	State MD	Zip Code 21297-0429
Purpose of Disbursement Office phone	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:		

Transaction ID : D773443

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address PO Box 17398		Amount of Each Disbursement this Period 406.99
City Baltimore	State MD	Zip Code 21297-0429
Purpose of Disbursement Office phone	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:		

Transaction ID : D774190

Full Name (Last, First, Middle Initial) c. Virginia Center for Inclusive Communities		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2015
Mailing Address 5511 Staples Mill Rd Ste 202		Amount of Each Disbursement this Period 175.00
City Henrico	State VA	Zip Code 23228-5445
Purpose of Disbursement Dinner tickets	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:		

Transaction ID : D773456

SUBTOTAL of Disbursements This Page (optional).....	969.55
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 41 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address PO Box 1202		Amount of Each Disbursement this Period 128.11 Transaction ID : D773373
City Richmond	State VA Zip Code 23218-1202	
Purpose of Disbursement Taxes	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. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO Box 1202		Amount of Each Disbursement this Period 389.39 Transaction ID : D773357
City Richmond	State VA Zip Code 23218-1202	
Purpose of Disbursement Taxes	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) C. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address PO Box 1202		Amount of Each Disbursement this Period 122.78 Transaction ID : D770718
City Richmond	State VA Zip Code 23218-1202	
Purpose of Disbursement Taxes	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:		

SUBTOTAL of Disbursements This Page (optional).....	640.28
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 42 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 1202		Amount of Each Disbursement this Period 375.00 Transaction ID : D771801
City Richmond	State VA Zip Code 23218-1202	
Purpose of Disbursement Taxes	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. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address PO Box 1202		Amount of Each Disbursement this Period 0.20 Transaction ID : D771802
City Richmond	State VA Zip Code 23218-1202	
Purpose of Disbursement Taxes	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) C. Virginia Peninsula Education Foundation		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address 2203 Andrews Blvd		Amount of Each Disbursement this Period 275.00 Transaction ID : D774197
City Hampton	State VA Zip Code 23663-1003	
Purpose of Disbursement Ad & table sponsorship	Category/Type 012	
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:		

SUBTOTAL of Disbursements This Page (optional).....	650.20
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 43 OF 49			
	<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)
Scott for Congress

A. WDCPIX

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 7324
Att: Mae Burke

City Suffolk State VA Zip Code 23437

Purpose of Disbursement Web service

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 01 / 2015

Amount of Each Disbursement this Period: 1000.00

Transaction ID : D773451

Category/Type

B. Mr. Sean Williamson

Full Name (Last, First, Middle Initial)
Mailing Address 337 47th St

City Newport News State VA Zip Code 23607-2507

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 01 / 2015

Amount of Each Disbursement this Period: 2203.80

Transaction ID : D773455

Category/Type: 001

C. Mr. Sean Williamson

Full Name (Last, First, Middle Initial)
Mailing Address 337 47th St

City Newport News State VA Zip Code 23607-2507

Purpose of Disbursement Christmas gift cards for Omega Psi Phi

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 14 / 2015

Amount of Each Disbursement this Period: 150.00

Transaction ID : D773465

Category/Type: 012

SUBTOTAL of Disbursements This Page (optional) 3353.80

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address 337 47th St		Amount of Each Disbursement this Period 2203.80 Transaction ID : D773368
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Salary	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. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 337 47th St		Amount of Each Disbursement this Period 2203.80 Transaction ID : D768938
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Salary	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) C. Mr. Sean Williamson		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address 337 47th St		Amount of Each Disbursement this Period 1000.00 Transaction ID : D774196
City Newport News	State VA	
Zip Code 23607-2507	Purpose of Disbursement Cell phone, Mileage	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:	

SUBTOTAL of Disbursements This Page (optional).....	5407.60
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 45 OF 49		
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Capital One		M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address PO Box 85617		Amount of Each Disbursement this Period
City Richmond State VA Zip Code 23285-5617		589.18
Purpose of Disbursement Credit card payment		Transaction ID : D769932
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Amtrak		M M / D D / Y Y Y Y 10 / 10 / 2015
Mailing Address 9304 Warwick Blvd		Amount of Each Disbursement this Period
City Newport News State VA Zip Code 23601-4535		242.35
Purpose of Disbursement Train ticket		Transaction ID : D769939
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Capital One		M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address PO Box 85617		Amount of Each Disbursement this Period
City Richmond State VA Zip Code 23285-5617		345.74
Purpose of Disbursement Credit card payment		Transaction ID : D772260
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2016	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	934.92
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 46 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Capital One		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		26		2015
M M	/	D D	/	Y Y Y Y									
12		26		2015									
Mailing Address PO Box 85617		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Richmond</td> <td>VA</td> <td>23285-5617</td> </tr> </table>		City	State	Zip Code	Richmond	VA	23285-5617	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>29.12</td> </tr> </table>		Amount of Each Disbursement this Period	29.12		
City	State	Zip Code											
Richmond	VA	23285-5617											
Amount of Each Disbursement this Period													
29.12													
Purpose of Disbursement Interest		Transaction ID : D772261											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Capital One		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>26</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		26		2015
M M	/	D D	/	Y Y Y Y									
12		26		2015									
Mailing Address PO Box 85617		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Richmond</td> <td>VA</td> <td>23285-5617</td> </tr> </table>		City	State	Zip Code	Richmond	VA	23285-5617	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>39.00</td> </tr> </table>		Amount of Each Disbursement this Period	39.00		
City	State	Zip Code											
Richmond	VA	23285-5617											
Amount of Each Disbursement this Period													
39.00													
Purpose of Disbursement Member fee		Transaction ID : D772262											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Southwest Airlines		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>27</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		27		2015
M M	/	D D	/	Y Y Y Y									
11		27		2015									
Mailing Address PO Box 36647		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Dallas</td> <td>TX</td> <td>75235-1647</td> </tr> </table>		City	State	Zip Code	Dallas	TX	75235-1647	<table border="1"> <tr> <td>Amount of Each Disbursement this Period</td> </tr> <tr> <td>133.98</td> </tr> </table>		Amount of Each Disbursement this Period	133.98		
City	State	Zip Code											
Dallas	TX	75235-1647											
Amount of Each Disbursement this Period													
133.98													
Purpose of Disbursement Airline ticket		Transaction ID : D772267											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 49			
	<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)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address PO Box 36647		Amount of Each Disbursement this Period 12.50
City Dallas	State TX	
Zip Code 75235-1647	Purpose of Disbursement Airline ticket	Transaction ID : D772268
Candidate Name	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. Capital One		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address PO Box 85617		Amount of Each Disbursement this Period 7399.11
City Richmond	State VA	
Zip Code 23285-5617	Purpose of Disbursement Credit card payment	Transaction ID : D774250
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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7399.11
TOTAL This Period (last page this line number only).....	49400.24

**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 48 OF 49
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Scott for Congress

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 6000.00 Transaction ID : D774198
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues Candidate Name Category/Type 012	
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. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 25000.00 Transaction ID : D774195
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues Candidate Name Category/Type 011	
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) C. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 10000.00 Transaction ID : D773338
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Dues Candidate Name Category/Type 012	
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:		

SUBTOTAL of Disbursements This Page (optional).....	41000.00
TOTAL This Period (last page this line number only).....	41000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Scott for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Democratic Party of Virginia		Nature of Debt (Purpose): GOTV calls
Mailing Address 1710 E Franklin St		
City	State	Zip Code
Richmond	VA	23223-7025

Outstanding Balance Beginning This Period	Transaction ID : D489671	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Numark Gallery		Nature of Debt (Purpose): Rental
Mailing Address 625 E St NW		
City	State	Zip Code
Washington	DC	20004-2204

Outstanding Balance Beginning This Period	Transaction ID : D765	
<input type="text" value="500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Promotional Considerations		Nature of Debt (Purpose): Yard Signs
Mailing Address 6500 Dickens Pl		
City	State	Zip Code
Richmond	VA	23230-2002

Outstanding Balance Beginning This Period	Transaction ID : D209571	
<input type="text" value="191.43"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="191.43"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3191.43"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="3191.43"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3191.43"/>