

# 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

ANN WAGNER FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 50

Check if different than previously reported. (ACC)

BALLWIN

MO

63022

2. **FEC IDENTIFICATION NUMBER** ▼

C C00495846

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MO

02

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Richard Magee

Signature of Treasurer Richard Magee

*[Electronically Filed]*

Date

/  /

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

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

Write or Type Committee Name  
**ANN WAGNER 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))....	287600.00	301205.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	287600.00	300705.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	63369.86	171302.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	608.13	608.13
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62761.73	170694.84
8. Cash on Hand at Close of Reporting Period (from Line 27).....	421348.00	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**ANN WAGNER FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	113550.00	117100.00
(ii) Unitemized.....	50.00	605.00
(iii) TOTAL of contributions from individuals ▶	113600.00	117705.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	174000.00	183500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	287600.00	301205.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	608.13	608.13
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	288208.13	301813.13

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	63369.86	171302.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS .....	9000.00	15500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	72369.86	187302.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	205509.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	288208.13
25. SUBTOTAL (add Line 23 and Line 24).....	493717.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72369.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	421348.00

**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 5 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anne Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013	
Mailing Address 16 Upper Ladue Rd.		<b>Transaction ID : SA11AI.13307</b>	
City Saint Louis	State MO	Zip Code 63124	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00 Contribution	
Name of Employer N/A	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>B. Anne Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013	
Mailing Address 16 Upper Ladue Rd.		<b>Transaction ID : SA11AI.13309</b>	
City Saint Louis	State MO	Zip Code 63124	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00 Redesignate: Contribution	
Name of Employer N/A	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date [MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>C. Anne Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013	
Mailing Address 16 Upper Ladue Rd.		<b>Transaction ID : SA11AI.13310</b>	
City Saint Louis	State MO	Zip Code 63124	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 Redesignate: from Primary	
Name of Employer N/A	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date [MEMO ITEM]		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 16 Upper Ladue Rd.

City Saint Louis	State MO	Zip Code 63124
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bodley Group	Occupation Chairman
----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.13303**

Amount of Each Receipt this Period  
 5200.00  
 Contribution

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

Mailing Address 16 Upper Ladue Rd.

City Saint Louis	State MO	Zip Code 63124
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bodley Group	Occupation Chairman
----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.13305**

Amount of Each Receipt this Period  
 -2600.00  
 Redesignate: Contribution  
**[MEMO ITEM]**

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

Mailing Address 16 Upper Ladue Rd.

City Saint Louis	State MO	Zip Code 63124
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bodley Group	Occupation Chairman
----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.13306**

Amount of Each Receipt this Period  
 2600.00  
 Redesignate: from Primary  
**[MEMO ITEM]**

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

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

5200.00

**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 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 11743 Manchester Road

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11AI.13033**

Amount of Each Receipt this Period  
 5200.00  
 Contribution

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

Mailing Address 11743 Manchester Road

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11AI.13035**

Amount of Each Receipt this Period  
 -2600.00  
 Redesignate: Contribution  
**[MEMO ITEM]**

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

Mailing Address 11743 Manchester Road

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11AI.13036**

Amount of Each Receipt this Period  
 2600.00  
 Redesignate: from Primary  
**[MEMO ITEM]**

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

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

5200.00

**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 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Richard Baalman</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 20 / 2013	
Mailing Address 11743 Manchester Road		<b>Transaction ID : SA11AI.13029</b>	
City Saint Louis	State MO	Zip Code 63131	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00	
Name of Employer Des Peres Commons LLC	Occupation Managing Member		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>B. Richard Baalman</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 20 / 2013	
Mailing Address 11743 Manchester Road		<b>Transaction ID : SA11AI.13031</b>	
City Saint Louis	State MO	Zip Code 63131	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00	
Name of Employer Des Peres Commons LLC	Occupation Managing Member		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Redesignate: Contribution  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C. Richard Baalman</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 20 / 2013	
Mailing Address 11743 Manchester Road		<b>Transaction ID : SA11AI.13032</b>	
City Saint Louis	State MO	Zip Code 63131	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Des Peres Commons LLC	Occupation Managing Member		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Redesignate: from Primary  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	5200.00



**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 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jim T. Blair**

Mailing Address 49 Manderleigh Estates Court

City Saint Louis State MO Zip Code 63131

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

Name of Employer Moneta Group Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2013

**Transaction ID : SA11A1.13260**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address 1600 N. Oak St.  
Apt. 820

City Arlington State VA Zip Code 22209

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

Name of Employer Gephardt Government Affairs Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2013

**Transaction ID : SA11A1.12865**

Amount of Each Receipt this Period  
 500.00

Contribution

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

Mailing Address 50 Creekwood Lane

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2013

**Transaction ID : SA11A1.12908**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

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

6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 50 Creekwood Lane

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2013

**Transaction ID : SA11AI.12910**

Amount of Each Receipt this Period  
 2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

Mailing Address 50 Creekwood Lane

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2013

**Transaction ID : SA11AI.12911**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: to General

**[MEMO ITEM]**

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

Mailing Address 50 Creekwood Lane

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2013

**Transaction ID : SA11AI.12912**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mary Bodine</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2013
Mailing Address 50 Creekwood Lane		<b>Transaction ID : SA11AI.12914</b>
City Saint Louis	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer N/A	Occupation Homemaker	Redesignate: Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Mary Bodine</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 21 / 2013
Mailing Address 50 Creekwood Lane		<b>Transaction ID : SA11AI.12915</b>
City Saint Louis	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00
Name of Employer N/A	Occupation Homemaker	Redesignate: to General
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. David Bradley Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2013
Mailing Address 825 Edmond Street		<b>Transaction ID : SA11AI.13261</b>
City St. Joseph	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NPG Newspapers	Occupation President	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 849 Cella Rd.

City St. Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2013

**Transaction ID : SA11AI.13014**

Amount of Each Receipt this Period  
 Contribution 2500.00

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

Mailing Address 5400 Macomb St. NW

City Washington State DC Zip Code 20016

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

Name of Employer Fierce, Isakowitz & Blalock Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.13246**

Amount of Each Receipt this Period  
 Contribution 500.00

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

Mailing Address 3106 Russell Road

City Alexandria State VA Zip Code 22305

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

Name of Employer Shamrock Advisors Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013

**Transaction ID : SA11AI.13040**

Amount of Each Receipt this Period  
 Contribution 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 21550 State Rt. 92

City State Zip Code  
Platte City MO 64079

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2013

**Transaction ID : SA11AI.13240**

Amount of Each Receipt this Period  
2500.00  
Contribution

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

Mailing Address 1200 W. 55th

City State Zip Code  
Kansas City MO 64113

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

Name of Employer Occupation  
Dickinson Financial Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.13332**

Amount of Each Receipt this Period  
2500.00  
Contribution

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

Mailing Address 8906 W. 155th Terr

City State Zip Code  
Overland Park KS 66221

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

Name of Employer Occupation  
QC Holdings Inc. Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2013

**Transaction ID : SA11AI.13242**

Amount of Each Receipt this Period  
1000.00  
Contribution

**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 14 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 1101 K Street NW  
Suite 301

City Washington State DC Zip Code 20005

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

Name of Employer Gephardt Gov Affairs Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2013

**Transaction ID : SA11AI.13268**

Amount of Each Receipt this Period  
Contribution 500.00

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

Mailing Address 6424 High Dr.

City Shawnee Mission State KS Zip Code 66208

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.13263**

Amount of Each Receipt this Period  
Contribution 250.00

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

Mailing Address 1304 Chancel Place

City Alexandria State VA Zip Code 22314

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

Name of Employer Ogilvy Government Relations Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 07 / 2013

**Transaction ID : SA11AI.12850**

Amount of Each Receipt this Period  
Contribution 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**J. Steven Hart**

Mailing Address 701 8th St. NW  
FI 5

City Washington State DC Zip Code 20001

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

Name of Employer Williams & Jensen Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11AI.13270**

Amount of Each Receipt this Period  
 Contribution 500.00

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

Mailing Address #1 Oak Ridge Drive

City Washington State MO Zip Code 63090

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

Name of Employer HTH Companies Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2013

**Transaction ID : SA11AI.13256**

Amount of Each Receipt this Period  
 Contribution 5200.00

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

Mailing Address #1 Oak Ridge Drive

City Washington State MO Zip Code 63090

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

Name of Employer HTH Companies Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2013

**Transaction ID : SA11AI.13258**

Amount of Each Receipt this Period  
 Redesignate: Contribution -2600.00

**[MEMO ITEM]**

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Greg Hoberock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2013
Mailing Address #1 Oak Ridge Drive		<b>Transaction ID : SA11AI.13259</b>
City Washington	State MO	Zip Code 63090
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer HTH Companies	Occupation Contractor	Redesignate: from Primary
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Kerry Holekamp</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2013
Mailing Address 5 Barclay Woods		<b>Transaction ID : SA11AI.12875</b>
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200.00	
Name of Employer N/A	Occupation Homemaker	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>C. Kerry Holekamp</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2013
Mailing Address 5 Barclay Woods		<b>Transaction ID : SA11AI.12877</b>
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer N/A	Occupation Homemaker	Redesignate: Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 5 Barclay Woods

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11AI.12878**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: to General

**[MEMO ITEM]**

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

Mailing Address 5 Barclay Woods

City Saint Louis State MO Zip Code 63124

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

Name of Employer Holekamp Capital Occupation Venture Capitalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11AI.12871**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

Mailing Address 5 Barclay Woods

City Saint Louis State MO Zip Code 63124

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

Name of Employer Holekamp Capital Occupation Venture Capitalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11AI.12873**

Amount of Each Receipt this Period  
 2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 5 Barclay Woods

City Saint Louis State MO Zip Code 63124

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

Name of Employer Holekamp Capital Occupation Venture Capitalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11AI.12874**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: to General

**[MEMO ITEM]**

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

Mailing Address 951 East Byrd Street

City Richmond State VA Zip Code 23219

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.13378**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address 7303 Peter Place

City McLean State VA Zip Code 22102

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

Name of Employer Arnold & Porter LLP Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

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

**Transaction ID : SA11AI.12960**

Amount of Each Receipt this Period  
 500.00

Contribution

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

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

1500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.13378

Attributed to the partners at a level before the itemization threshold.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 8610 Mohawk

City Leawood State KS Zip Code 66206

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

Name of Employer Logan, Logan & Watson Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11A1.13313**

Amount of Each Receipt this Period  
 500.00

Contribution

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

Mailing Address 12909 Camphill Court

City Saint Louis State MO Zip Code 63146

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

Name of Employer Saint Louis Medical Clinic Occupation RN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11A1.12851**

Amount of Each Receipt this Period  
 300.00

Contribution

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

Mailing Address 40 Glen Eagles Drive

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2013

**Transaction ID : SA11A1.13020**

Amount of Each Receipt this Period  
 5200.00

Contribution

**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 21 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 40 Glen Eagles Drive

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2013

**Transaction ID : SA11AI.13022**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

Mailing Address 40 Glen Eagles Drive

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2013

**Transaction ID : SA11AI.13023**

Amount of Each Receipt this Period  
 2600.00

Redesignate: from Primary

**[MEMO ITEM]**

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

Mailing Address 40 Glen Eagles Dr.

City Saint Louis State MO Zip Code 63124

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2013

**Transaction ID : SA11AI.13010**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. James McDonnell III</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2013	
Mailing Address 40 Glen Eagles Dr.		<b>Transaction ID : SA11AI.13018</b>	
City Saint Louis	State MO	Zip Code 63124	Amount of Each Receipt this Period -2600.00
FEC ID number of contributing federal political committee. C		Redesignate: Contribution	
Name of Employer N/A	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>B. James McDonnell III</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2013	
Mailing Address 40 Glen Eagles Dr.		<b>Transaction ID : SA11AI.13019</b>	
City Saint Louis	State MO	Zip Code 63124	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Redesignate: to General	
Name of Employer N/A	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>C. Roy Pfautch</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2013	
Mailing Address 52 Portland Place		<b>Transaction ID : SA11AI.12867</b>	
City Saint Louis	State MO	Zip Code 63108	Amount of Each Receipt this Period 5200.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Civic Service Inc.	Occupation Consultant	<b>[MEMO ITEM]</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108

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

Name of Employer Civic Service Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2013

**Transaction ID : SA11AI.12869**

Amount of Each Receipt this Period  
 2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

Mailing Address 52 Portland Place

City Saint Louis State MO Zip Code 63108

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

Name of Employer Civic Service Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2013

**Transaction ID : SA11AI.12870**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: to General

**[MEMO ITEM]**

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

Mailing Address 6549 Wenonga Road

City Mission Road State KS Zip Code 66208

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

Name of Employer Colt Energy Inc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

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

**Transaction ID : SA11AI.13311**

Amount of Each Receipt this Period  
 1000.00

Contribution

**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 24 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Leigh Ann Pusey**

Mailing Address 1119 Alexandria Ave.

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

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

Name of Employer American Insurance Association	Occupation President
----------------------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11AI.13210**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

Mailing Address 13 East Brentmoor Park

City Clayton	State MO	Zip Code 63105
-----------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11AI.12962**

Amount of Each Receipt this Period  
 5000.00  
 Contribution

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

Mailing Address 13 East Brentmoor Park

City Clayton	State MO	Zip Code 63105
-----------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11AI.12964**

Amount of Each Receipt this Period  
 -2500.00  
 Reattribute: Contribution

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

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

3500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 13 East Brentwood Park

City Clayton State MO Zip Code 63105

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11AI.12965**

Amount of Each Receipt this Period  
2500.00

Reattribute: from John Qualy

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

Mailing Address 6209 Foxcroft Road

City Alexandria State VA Zip Code 22307

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

Name of Employer AIADA Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2013

**Transaction ID : SA11AI.13330**

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11AI.13120**

Amount of Each Receipt this Period  
5200.00

Contribution

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

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

8200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11AI.13122**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11AI.13123**

Amount of Each Receipt this Period  
 2600.00

Redesignate: from Primary

**[MEMO ITEM]**

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11AI.13124**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11A1.13126**

Amount of Each Receipt this Period  
 -2600.00

Redesignate: Contribution

**[MEMO ITEM]**

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11A1.13127**

Amount of Each Receipt this Period  
 2600.00

Redesignate: from Primary

**[MEMO ITEM]**

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

Mailing Address 5214 Farrington Road

City Bethesda State MD Zip Code 20816

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

Name of Employer The Smith-Free Group Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 25 / 2013

**Transaction ID : SA11A1.12886**

Amount of Each Receipt this Period  
 1000.00

Contribution

**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 28 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 13303 Buckland Hall Road

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Community Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2013

**Transaction ID : SA11AI.12927**

Amount of Each Receipt this Period  
 2600.00

Reattribute: From Patrick Stokes

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

Mailing Address 13303 Buckland Hall Rd.

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2013

**Transaction ID : SA11AI.12924**

Amount of Each Receipt this Period  
 5200.00

Contribution

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

Mailing Address 13303 Buckland Hall Rd.

City Saint Louis State MO Zip Code 63131

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2013

**Transaction ID : SA11AI.12926**

Amount of Each Receipt this Period  
 -2600.00

Reattribute: Contribution

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>David Taiclet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2013	
Mailing Address 16624 Kehrsgrrove Dr		<b>Transaction ID : SA11AI.13225</b>	
City Clarkson Valley	State MO	Zip Code 63005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Alpine Confections Inc.	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>David Taiclet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2013	
Mailing Address 16624 Kehrsgrrove Dr		<b>Transaction ID : SA11AI.13227</b>	
City Clarkson Valley	State MO	Zip Code 63005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2400.00	
Name of Employer Alpine Confections Inc.	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Redesignate: Contribution  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>David Taiclet</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2013	
Mailing Address 16624 Kehrsgrrove Dr		<b>Transaction ID : SA11AI.13228</b>	
City Clarkson Valley	State MO	Zip Code 63005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00	
Name of Employer Alpine Confections Inc.	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Redesignate: from Primary  
**[MEMO ITEM]**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 16624 Kehrsgrrove Dr.

City Clarkson Valley	State MO	Zip Code 63005
-------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11AI.13325**

Amount of Each Receipt this Period  
 Contribution 5000.00

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

Mailing Address 16624 Kehrsgrrove Dr.

City Clarkson Valley	State MO	Zip Code 63005
-------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11AI.13327**

Amount of Each Receipt this Period  
 Redesignate: Contribution -2400.00

**[MEMO ITEM]**

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

Mailing Address 16624 Kehrsgrrove Dr.

City Clarkson Valley	State MO	Zip Code 63005
-------------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11AI.13328**

Amount of Each Receipt this Period  
 Redesignate: From Primary 2400.00

**[MEMO ITEM]**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 12326 Wedgeton Lane

City Des Peres State MO Zip Code 63131

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

Name of Employer Dot Foods, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11A1.13315**

Amount of Each Receipt this Period  
 Contribution 1000.00

**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).....

1000.00

113550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

A. Mailing Address 4301 WILSON BOULEVARD

City State Zip Code  
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2013

Transaction ID : SA11C.13281

Amount of Each Receipt this Period  
 1000.00  
 Contribution

B. Full Name (Last, First, Middle Initial)  
AMEREN FEDERAL POLITICAL ACTION COMMITTEE (AMERENFED PAC)

Mailing Address 1331 PENNSYLVANIA AVE., NW  
SUITE 550S

City State Zip Code  
WASHINGTON DC 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 01 / 2013

Transaction ID : SA11C.12863

Amount of Each Receipt this Period  
 2000.00  
 Contribution

C. Full Name (Last, First, Middle Initial)  
AMERICAN AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address 1101 17 STREET N.W., SUITE 600

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2013

Transaction ID : SA11C.13198

Amount of Each Receipt this Period  
 1000.00  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 101
<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE**

Mailing Address **401 N. LINDBERGH BLVD**

City **ST. LOUIS** State **MO** Zip Code **63141**

FEC ID number of contributing federal political committee. **C C00293910**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 25 / 2013**

**Transaction ID : SA11C.13337**

Amount of Each Receipt this Period  
**2000.00**  
Contribution

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

Mailing Address **1120 CONNECTICUT AVENUE NW  
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20036**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 23 / 2013**

**Transaction ID : SA11C.13266**

Amount of Each Receipt this Period  
**2500.00**  
Contribution

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

Mailing Address **1 Riverside Plaza**

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

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11C.13289**

Amount of Each Receipt this Period  
**1000.00**  
Contribution

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 18TH STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11C.12893**

Amount of Each Receipt this Period  
 2000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN GAS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 400 N. CAPITOL ST., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13291**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOTEL AND LODGING ASSOCIATION PAC**

Mailing Address 1201 NEW YORK AVENUE, NW  
SIXTH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2013

**Transaction ID : SA11C.13202**

Amount of Each Receipt this Period  
 1500.00  
 Contribution

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I STREET, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00041566**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13298**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUARIES NTSAA PAC**

Mailing Address 4245 N FAIRFAX DRIVE  
SUITE 750

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C C00515049**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2013

**Transaction ID : SA11C.12934**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**AMERIPRISE FINANCIAL INC. POLITICAL ACTION COMMITTEE (AMERIPRISEPAC)**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 912 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00414474**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13222**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ARCH COAL INC. POLITICAL ACTION COMMITTEE (ARCHPAC)**

Mailing Address **CITYPLACE ONE**

City **ST. LOUIS** State **MO** Zip Code **63141**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2013**

**Transaction ID : SA11C.12916**

Amount of Each Receipt this Period  
 Contribution **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Mailing Address **11921 FREEDOM DRIVE SUITE 1100**

City **RESTON** State **VA** Zip Code **20190**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13288**

Amount of Each Receipt this Period  
 Contribution **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address **208 S. AKARD STREET SUITE 2701**

City **DALLAS** State **TX** Zip Code **75202**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2013**

**Transaction ID : SA11C.13026**

Amount of Each Receipt this Period  
 Contribution **1000.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BANK OF AMERICA CORPORATION FEDERAL PAC**

Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950  
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00364778**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13284**

Amount of Each Receipt this Period  
 Contribution 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**BARNES & THORNBURG POLITICAL ACTION COMMITTEE**

Mailing Address 11 SOUTH MERIDIAN STREET

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C C00395947**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13234**

Amount of Each Receipt this Period  
 Contribution 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2013

**Transaction ID : SA11C.13329**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)**

Mailing Address **1101 PENNSYLVANIA AVENUE NW #1000**

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		26		2013

**Transaction ID : SA11C.13334**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00  
 Contribution

Full Name (Last, First, Middle Initial)  
**CME GROUP INC. PAC**

Mailing Address **20 SOUTH WACKER DRIVE**

City	State	Zip Code
CHICAGO	IL	60606

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		08		2013

**Transaction ID : SA11C.13237**

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

Full Name (Last, First, Middle Initial)  
**CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL**

Mailing Address **ONE ENERGY PLAZA  
EP8-267**

City	State	Zip Code
JACKSON	MI	49201

FEC ID number of contributing federal political committee. **C C00075473**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		28		2013

**Transaction ID : SA11C.12859**

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

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

\_\_\_\_\_ 4000.00

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

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address **1701 JFK BLVD, 49TH FLOOR**

City	State	Zip Code
PHILADELPHIA	PA	19103

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		01		2013

**Transaction ID : SA11C.12884**

Amount of Each Receipt this Period  

1500.00
---------

 Contribution

B. Full Name (Last, First, Middle Initial)  
**Committee for Advancement of Cotton**

Mailing Address **PO Box 2995**

City	State	Zip Code
Cordova	TN	38088

FEC ID number of contributing federal political committee. **C C00014019**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		11		2013

**Transaction ID : SA11C.13215**

Amount of Each Receipt this Period  

1000.00
---------

 Contribution

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

Mailing Address **PO Box 10566**

City	State	Zip Code
BIRMINGHAM	AL	35296

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		05		2013

**Transaction ID : SA11C.13208**

Amount of Each Receipt this Period  

1000.00
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 Contribution

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

3500.00
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**TOTAL** This Period (last page this line number only).....

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**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 40 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11C.12918**

Amount of Each Receipt this Period  
Contribution 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : SA11C.12917**

Amount of Each Receipt this Period  
Contribution 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 05 / 2013

**Transaction ID : SA11C.12931**

Amount of Each Receipt this Period  
Contribution 2000.00

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

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

12000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2013

**Transaction ID : SA11C.12894**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC; THE**

Mailing Address 601 13TH ST NW SUITE 580 SOUTH

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00497917**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2013

**Transaction ID : SA11C.13045**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**DRS TECHNOLOGIES INC. GOOD GOVERNMENT FUND**

Mailing Address 5 SYLVAN WAY

City PARSIPANNY State NJ Zip Code 07054

FEC ID number of contributing federal political committee. **C C00275123**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11C.13205**

Amount of Each Receipt this Period  
 2000.00  
 Contribution

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address 550 SOUTH TRYON STREET

City State Zip Code  
CHARLOTTE NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2013

**Transaction ID : SA11C.13247**

Amount of Each Receipt this Period  
 Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE**

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 08 / 2013

**Transaction ID : SA11C.12936**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

Mailing Address 12555 MANCHESTER ROAD

City State Zip Code  
ST. LOUIS MO 63131

FEC ID number of contributing federal political committee. **C** C00410407

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2013

**Transaction ID : SA11C.12932**

Amount of Each Receipt this Period  
 Contribution 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EI POWER PAC**

Mailing Address 701 Pennsylvania Ave.  
N.W.

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11C.13195**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

Mailing Address 3 Bethesda Metro Center

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C C00113811**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13297**

Amount of Each Receipt this Period  
 Contribution 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ernst & Young Political Action Committee**

Mailing Address 1101 New York Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11C.13059**

Amount of Each Receipt this Period  
 Contribution 2000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 44 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address **25 E MAIN STREET**  
**SUITE 200**

City **RICHMOND** State **VA** Zip Code **23219**

FEC ID number of contributing federal political committee. **C C00384701**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**02 / 12 / 2013**

**Transaction ID : SA11C.13027**

Amount of Each Receipt this Period  
**5000.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE**

Mailing Address **550 E. WALNUT ST**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00290502**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**03 / 18 / 2013**

**Transaction ID : SA11C.13286**

Amount of Each Receipt this Period  
**1000.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address **P.O. BOX 75000**

City **DETROIT** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**03 / 12 / 2013**

**Transaction ID : SA11C.13216**

Amount of Each Receipt this Period  
**2000.00**

Contribution

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

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

**8000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address P.O. BOX 75000

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : SA11C.13302**

Amount of Each Receipt this Period  
 Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GREAT LAKES SUGARBEET GROWERS POLITICAL ACTION COMMITTEE**

Mailing Address 2600 SOUTH EUCLID AVENUE

City State Zip Code  
BAY CITY MI 48706

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2013

**Transaction ID : SA11C.13008**

Amount of Each Receipt this Period  
 Contribution 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**GREENBERG TRAURIG, P.A. PAC**

Mailing Address 54 STATE STREET  
6TH FLOOR

City State Zip Code  
ALBANY NY 12207

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013

**Transaction ID : SA11C.13236**

Amount of Each Receipt this Period  
 Contribution 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: (check only one)	PAGE 46 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREENBERG TRAUIG, P.A. PAC**

Mailing Address **54 STATE STREET**  
**6TH FLOOR**

City **ALBANY** State **NY** Zip Code **12207**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2013**

**Transaction ID : SA11C.13212**

Amount of Each Receipt this Period  
 Contribution **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT**

Mailing Address **2099 PENNSYLVANIA AVENUE, N.W.**  
**SUITE 100**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00171330**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2013**

**Transaction ID : SA11C.13042**

Amount of Each Receipt this Period  
 Contribution **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address **101 CONSTITUTION AVE. NW**  
**SUITE 500 WEST**

City **WASHINGTON** State **DC** Zip Code **20001**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2013**

**Transaction ID : SA11C.13333**

Amount of Each Receipt this Period  
 Contribution **1000.00**

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

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

**3000.00**

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.13042

Contribution from Holland & Knight attributed to the partners at a level below the itemization threshold.

Form/Schedule:

Transaction ID:

**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 48 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11C.13058**

Amount of Each Receipt this Period  
 1000.00

Contributions

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6000.00

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

**Transaction ID : SA11C.13299**

Amount of Each Receipt this Period  
 1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2013

**Transaction ID : SA11C.12922**

Amount of Each Receipt this Period  
 3000.00

Contribution

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

Mailing Address PO BOX 30844

City State Zip Code  
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11C.13338**

Amount of Each Receipt this Period  
 5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**J P MORGAN CHASE BANK N A**

Mailing Address 10 S DEARBORN STREET IL1-0520

City State Zip Code  
CHICAGO IL 60603

FEC ID number of contributing federal political committee. **C** C70005343

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11C.13346**

Amount of Each Receipt this Period  
 2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**KANSAS CITY SOUTHERN EMPLOYEE PAC**

Mailing Address 427 W 12TH STREET

City State Zip Code  
KANSAS CITY MO 64105

FEC ID number of contributing federal political committee. **C** C00139451

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2013

**Transaction ID : SA11C.12897**

Amount of Each Receipt this Period  
 1000.00

Contribution

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEYCORP ADVOCATES FUND**

Mailing Address 127 PUBLIC SQUARE  
OH-01-27-1816

City CLEVELAND State OH Zip Code 44114

FEC ID number of contributing federal political committee. **C** C00073155

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11C.13206**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address 1801 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2013

**Transaction ID : SA11C.13054**

Amount of Each Receipt this Period  
 1500.00  
 Contribution

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

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2013

**Transaction ID : SA11C.12881**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 22 2013**

**Transaction ID : SA11C.13251**

Amount of Each Receipt this Period  
**1000.00**  
 Contribution

Full Name (Last, First, Middle Initial)  
**MASTERCARD INTERNATIONAL INC. EMPLOYEES' PAC**

Mailing Address **2000 PURCHASE ST.**

City State Zip Code  
**PURCHASE NY 10577**

FEC ID number of contributing federal political committee. **C C00410274**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 15 2013**

**Transaction ID : SA11C.13300**

Amount of Each Receipt this Period  
**2000.00**  
 Contribution

Full Name (Last, First, Middle Initial)  
**MFA PAC**

Mailing Address **PO BOX 21664**

City State Zip Code  
**ROANOKE VA 24018**

FEC ID number of contributing federal political committee. **C C00467639**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 22 2013**

**Transaction ID : SA11C.13282**

Amount of Each Receipt this Period  
**500.00**  
 Contribution

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

**3500.00**

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

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

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

FOR LINE NUMBER: PAGE 52 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND

Mailing Address 800 N. LINDBERGH BLVD.

City State Zip Code  
ST. LOUIS MO 63167

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2013

**Transaction ID : SA11C.13052**

Amount of Each Receipt this Period  
 5000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND

Mailing Address 800 N. LINDBERGH BLVD.

City State Zip Code  
ST. LOUIS MO 63167

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2013

**Transaction ID : SA11C.13053**

Amount of Each Receipt this Period  
 5000.00  
 Contribution

**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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11C.13249**

Amount of Each Receipt this Period  
 2000.00  
 Contribution

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	22	/	2013

Transaction ID : SA11C.13037

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

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1600 DUKE STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	21	/	2013

Transaction ID : SA11C.13050

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00  
 Contribution

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE

Mailing Address 3138 10TH STREET NORTH

City	State	Zip Code
ARLINGTON	VA	22201

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	01	/	2013

Transaction ID : SA11C.12891

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 7000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**National Association of Professional Insurance Agents**

Mailing Address 400 N. Washington St.

City	State	Zip Code
Alexandria	VA	22314

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2013

**Transaction ID : SA11C.13294**

Amount of Each Receipt this Period  
 Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City	State	Zip Code
IRVING	TX	75038

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2013

**Transaction ID : SA11C.13217**

Amount of Each Receipt this Period  
 Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS POLITICAL ACTION COMMITTEE**

Mailing Address ONE NATIONWIDE PLAZA, 1-32-301

City	State	Zip Code
COLUMBUS	OH	43215

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11C.13342**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **51 MADISON AVENUE**  
**ROOM 1109**

City **NEW YORK** State **NY** Zip Code **10010**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2013**

**Transaction ID : SA11C.12901**

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

**B.** Full Name (Last, First, Middle Initial)  
**NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN PAC)**

Mailing Address **1666 K STREET, NW**  
**SUITE 500**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00473652**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 07 / 2013**

**Transaction ID : SA11C.12882**

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

**C.** Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **1776 I STREET NW 4TH FLR**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 12 / 2013**

**Transaction ID : SA11C.13203**

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

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

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

\_\_\_\_\_ 4000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
PEABODY ENERGY CORPORATION POLITICAL ACTION COMMITTEE (PEABODY PAC)

Mailing Address 701 MARKET STREET

City ST. LOUIS State MO Zip Code 63101

FEC ID number of contributing federal political committee. **C** C00110478

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13317**

Amount of Each Receipt this Period  
 Contribution 2000.00

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

Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2013

**Transaction ID : SA11C.13061**

Amount of Each Receipt this Period  
 Contribution 1500.00

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

Mailing Address 249 Fifth Ave.

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00035519

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11C.12899**

Amount of Each Receipt this Period  
 Contribution 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 57 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVERNMENT**

Mailing Address **TWO NORTH NINTH STREET**

City **ALLENTOWN** State **PA** Zip Code **18101**

FEC ID number of contributing federal political committee. **C C00228106**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2013**

**Transaction ID : SA11C.13318**

Amount of Each Receipt this Period  
 Contribution **1000.00**

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

Mailing Address **1301 K STREET, NW  
SUITE 800W**

City **WASHINGTON** State **DC** Zip Code **20005**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 29 / 2013**

**Transaction ID : SA11C.12855**

Amount of Each Receipt this Period  
 Contribution **1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**QC HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address **9401 INDIAN CREEK PARKWAY  
SUITE 1500**

City **OVERLAND PARK** State **KS** Zip Code **66210**

FEC ID number of contributing federal political committee. **C C00411769**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2013**

**Transaction ID : SA11C.13244**

Amount of Each Receipt this Period  
 Contribution **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 58 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**QC HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 9401 INDIAN CREEK PARKWAY  
SUITE 1500

City OVERLAND PARK State KS Zip Code 66210

FEC ID number of contributing federal political committee. **C C00411769**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2013

**Transaction ID : SA11C.13245**

Amount of Each Receipt this Period  
 Contribution 5000.00

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

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2013

**Transaction ID : SA11C.13038**

Amount of Each Receipt this Period  
 Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.13336**

Amount of Each Receipt this Period  
 Contribution 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 59 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

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

Mailing Address 1015 15TH STREET NW  
SUITE 920

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00432252

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 28 / 2013

**Transaction ID : SA11C.13051**

Amount of Each Receipt this Period  
2000.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
**RELY ON YOUR BELIEFS FUND**

Mailing Address 209 PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00344648

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2013

**Transaction ID : SA11C.13047**

Amount of Each Receipt this Period  
5000.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
**RGA REINSURANCE COMPANY FEDERAL PAC**

Mailing Address 1370 TIMBERLAKE MANOR PARKWAY

City CHESTERFIELD State MO Zip Code 63017

FEC ID number of contributing federal political committee. **C** C00461129

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 07 / 2013

**Transaction ID : SA11C.13024**

Amount of Each Receipt this Period  
2500.00  
Contribution

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW  
8TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 28 / 2013

**Transaction ID : SA11C.12930**

Amount of Each Receipt this Period  
Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Mailing Address 3930 PENDER DRIVE  
SUITE 340

City FAIRFAX State VA Zip Code 20121

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2013

**Transaction ID : SA11C.12861**

Amount of Each Receipt this Period  
Contribution 2500.00

**C.** Full Name (Last, First, Middle Initial)  
SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City RENVILLE State MN Zip Code 56284

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 25 / 2013

**Transaction ID : SA11C.13252**

Amount of Each Receipt this Period  
Contribution 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEPTOE AND JOHNSON LLP POLITICAL ACTION COMMITTEE**

Mailing Address 1330 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00431858

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2013

**Transaction ID : SA11C.13043**

Amount of Each Receipt this Period  
 1500.00  
 Contribution

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

Mailing Address 919 E MAIN STREET

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00386524

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2013

**Transaction ID : SA11C.13344**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2013

**Transaction ID : SA11C.13056**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

**A.** Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2013

**Transaction ID : SA11C.13194**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

Full Name (Last, First, Middle Initial)  
**TEPAC**

**B.** Mailing Address 702 N Franklin St.

City Tampa State FL Zip Code 33802

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11C.13254**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

**C.** Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2013

**Transaction ID : SA11C.12923**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2013

**Transaction ID : SA11C.13039**

Amount of Each Receipt this Period  
 3000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVENUE, NW  
SUITE 1000E

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11C.13239**

Amount of Each Receipt this Period  
 2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2013

**Transaction ID : SA11C.13224**

Amount of Each Receipt this Period  
 2000.00

Contribution

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**US Bancorp Political Participation Program**

Mailing Address 800 Nicollet Mall

City State Zip Code  
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C C00488882**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2013

**Transaction ID : SA11C.13055**

Amount of Each Receipt this Period  
 Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address ONE VALERO WAY

City State Zip Code  
SAN ANTONIO TX 78249

FEC ID number of contributing federal political committee. **C C00109546**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.13280**

Amount of Each Receipt this Period  
 Contribution 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**VANGUARD COMMITTEE FOR RESPONSIBLE GOVERNMENT**

Mailing Address 975 F St. NW  
Suite 500

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00410266**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11C.13213**

Amount of Each Receipt this Period  
 Contribution 1000.00

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

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

4000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 101
	<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)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WESTINGHOUSE ELECTRIC COMPANY LLC PAC**

Mailing Address 900 19TH STREET, NW  
SUITE 350

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346361

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2013

**Transaction ID : SA11C.12885**

Amount of Each Receipt this Period  
Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WEXLER & WALKER PUBLIC POLICY ASSOCIATES PAC (A UNIT OF HILL & KNOWLTON)**

Mailing Address 1317 F STREET NW  
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00248195

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 07 / 2013

**Transaction ID : SA11C.13220**

Amount of Each Receipt this Period  
Contribution 500.00

**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  
Contribution

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

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

1500.00

174000.00

**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 66 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Laclede Gas Company**

Mailing Address 710 Olive Street

City Saint Louis State MO Zip Code 63171

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
212.32

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2013

**Transaction ID : SA14.12856**

Amount of Each Receipt this Period  
93.91

Refund

**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).....

93.91

93.91

**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 67 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AccuPay</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2013
Mailing Address 548 N Emerson Ave		Amount of Each Disbursement this Period 404.50 <b>Transaction ID : SB17.12978</b>
City Greenwood	State IN Zip Code 46143	
Purpose of Disbursement Tax Impound		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Ameren Missouri</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address P.O. Box 66301		Amount of Each Disbursement this Period 191.37 <b>Transaction ID : SB17.12827</b>
City Saint Louis	State MO Zip Code 63166	
Purpose of Disbursement Utilities		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 86.86 <b>Transaction ID : SB17.12829</b>
City Dallas	State TX Zip Code 75265	
Purpose of Disbursement Telephone Expense		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	682.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 221.89 <b>Transaction ID : SB17.12830</b>
City Dallas State TX Zip Code 75265	Purpose of Disbursement Telephone Expense	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2013
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 91.60 <b>Transaction ID : SB17.12845</b>
City Dallas State TX Zip Code 75265	Purpose of Disbursement Telephone Expense	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 5001		Amount of Each Disbursement this Period 183.20 <b>Transaction ID : SB17.12846</b>
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement Telephone Expense	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	496.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2013
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 9975.70 <b>Transaction ID : SB17.12973</b>
City Dallas State TX Zip Code 75265	Purpose of Disbursement Telephone Expense	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Capital Enhancement, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 12977 N 40 Dr Ste 201		Amount of Each Disbursement this Period 9132.50 <b>Transaction ID : SB17.12841</b>
City Saint Louis State MO Zip Code 63141	Purpose of Disbursement Fundraising Consulting Fee Q4 2012	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 300 First STI, SE		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : SB17.12839</b>
City Washington DC State DC Zip Code 20003	Purpose of Disbursement Political Breakfast: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9975.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address RM B - 3398		Amount of Each Disbursement this Period 1118.99 <b>Transaction ID : SB17.12834</b>
City Washington State DC Zip Code 20515	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Commerce Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address PO Box 411036		Amount of Each Disbursement this Period 3957.53 <b>Transaction ID : SB17.12831</b>
City Kansas City State MO Zip Code 64141	Purpose of Disbursement Credit Card: See Below	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 8750 Manchester Road		Amount of Each Disbursement this Period 14.59 <b>Transaction ID : SB17.12831.1</b> <b>[MEMO ITEM]</b>
City Saint Louis State MO Zip Code 63144	Purpose of Disbursement Office Supplies	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5076.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Mailchimp</b>		M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 530 Means St.		Amount of Each Disbursement this Period
City Atlanta State GA Zip Code 30318		240.00
Purpose of Disbursement Email Maintenance		Transaction ID : SB17.12831.3
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. American Airlines</b>		M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period
City Fort Worth State TX Zip Code 76155		827.60
Purpose of Disbursement Political Travel: Airfare		Transaction ID : SB17.12831.5
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. U.S. Airways</b>		M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 4000 E Sky Harbour		Amount of Each Disbursement this Period
City Phoenix State AZ Zip Code 85034		529.10
Purpose of Disbursement Political Travel: Airfare		Transaction ID : SB17.12831.6
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 8750 Manchester Road		Amount of Each Disbursement this Period 683.38
City Saint Louis	State MO Zip Code 63144	
Purpose of Disbursement Office Equipment	Category/Type	<b>Transaction ID : SB17.12831.7</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. U.S. Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 4000 E Sky Harbour		Amount of Each Disbursement this Period 75.00
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Agent Fee	Category/Type	<b>Transaction ID : SB17.12831.8</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. McArthurs Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 3055 Lemay Ferry Road		Amount of Each Disbursement this Period 287.98
City St. Louis	State MO Zip Code 63125	
Purpose of Disbursement Event Expense: Food & Beverage	Category/Type	<b>Transaction ID : SB17.12831.11</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Smitty's Food</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2012
Mailing Address 14874 Clayton Road		Amount of Each Disbursement this Period 295.95
City Chesterfield	State MO	
Purpose of Disbursement Event Expense: Food & Beverage		Transaction ID : SB17.12831.12
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012
Mailing Address Longworth Building - Basement		Amount of Each Disbursement this Period 249.60
City Washington	State DC	
Purpose of Disbursement Donor Christmas Items		Transaction ID : SB17.12831.13
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Commerce Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2013
Mailing Address PO Box 411036		Amount of Each Disbursement this Period 182.81
City Kansas City	State MO	
Purpose of Disbursement Check Order		Transaction ID : SB17.12977
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	182.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Commerce Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2013
Mailing Address PO Box 411036		Amount of Each Disbursement this Period 11368.75 <b>Transaction ID : SB17.12947</b>
City Kansas City	State MO	
Zip Code 64141	Purpose of Disbursement Credit Card: See Below	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Party City</b>		Date of Disbursement MM / DD / YYYY 12 / 19 / 2012
Mailing Address 15894 Manchester Road		Amount of Each Disbursement this Period 150.20 <b>Transaction ID : SB17.12947.0</b>
City Ellisville	State MO	
Zip Code 63011	Purpose of Disbursement Event Expense: Supplies	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Dierberg's Market</b>		Date of Disbursement MM / DD / YYYY 12 / 19 / 2012
Mailing Address 1730 Clarkson Road		Amount of Each Disbursement this Period 405.12 <b>Transaction ID : SB17.12947.4</b>
City Chesterfield	State MO	
Zip Code 63017	Purpose of Disbursement Event Expense: Food & Beverage	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11368.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 8750 Manchester Road		Amount of Each Disbursement this Period 77.89
City Saint Louis	State MO	
Zip Code 63144	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12947.5
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 561.69
City Memphis	State TN	
Zip Code 38120	Purpose of Disbursement Shipping and Moving Expense	Transaction ID : SB17.12947.6
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012
Mailing Address PO Box 650553		Amount of Each Disbursement this Period 30.00
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Data Charge	Transaction ID : SB17.12947.7
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2012
Mailing Address 7001 Tower Road		Amount of Each Disbursement this Period 343.90
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Political Travel: Airfare	Transaction ID : SB17.12947.8
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2012
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 7.47
City Memphis	State TN	
Zip Code 38120	Purpose of Disbursement Shipping	Transaction ID : SB17.12947.9
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 7001 Tower Road		Amount of Each Disbursement this Period 30.00
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Service Charge	Transaction ID : SB17.12947.10
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 717.70
City Dallas State TX Zip Code 75235	Purpose of Disbursement Political Travel: Airfare	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.11 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. U.S. Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 4000 E Sky Harbour		Amount of Each Disbursement this Period 159.80
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Political Travel: Airfare	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.12 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 24.41
City Memphis State TN Zip Code 38120	Purpose of Disbursement Shipping	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.13 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Caucus Room</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 2350 M Street NW		Amount of Each Disbursement this Period 1050.00
City Washington State DC Zip Code 20037	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.16 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2013
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 25.43
City Memphis State TN Zip Code 38120	Purpose of Disbursement Shipping	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.17 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. The Caucus Room</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2013
Mailing Address 2350 M Street NW		Amount of Each Disbursement this Period 4540.20
City Washington State DC Zip Code 20037	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12947.18 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Mailchimp</b>		M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 530 Means St.		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30318
Purpose of Disbursement Email Maintenance	Category/Type	240.00
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Disbursement For: 2014	<b>Transaction ID : SB17.12947.21</b>
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>[MEMO ITEM]</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: MO District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Pak Mail</b>		M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 12545 Olive Blvd.		Amount of Each Disbursement this Period
City St. Louis	State MO	Zip Code 63141
Purpose of Disbursement Moving Expense	Category/Type	370.00
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Disbursement For: 2014	<b>Transaction ID : SB17.12947.23</b>
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>[MEMO ITEM]</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: MO District: 02		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Congressional Institute</b>		M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 1700 Diagnol Road #730		Amount of Each Disbursement this Period
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Registration	Category/Type	1051.00
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Disbursement For: 2014	<b>Transaction ID : SB17.12947.25</b>
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>[MEMO ITEM]</b>
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: MO District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ameren Missouri</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013
Mailing Address P.O. Box 66301		Amount of Each Disbursement this Period 215.53
City Saint Louis	State MO	
Zip Code 63166	Purpose of Disbursement Utility Bill	Transaction ID : SB17.12947.26
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2012
Mailing Address 300 First STI, SE		Amount of Each Disbursement this Period 400.00
City Washington DC	State DC	
Zip Code 20003	Purpose of Disbursement Dues and Political Meals	Transaction ID : SB17.12947.27
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. Commerce Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address PO Box 411036		Amount of Each Disbursement this Period 36.00
City Kansas City	State MO	
Zip Code 64141	Purpose of Disbursement Bank Service Charge	Transaction ID : SB17.12979
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	36.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Commerce Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address PO Box 411036		Amount of Each Disbursement this Period 3653.70
City Kansas City	State MO	
Zip Code 64141	Purpose of Disbursement Credit Card: See Below	Transaction ID : SB17.12948
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Renaissance Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2013
Mailing Address 800 Washington Ave.		Amount of Each Disbursement this Period 435.59
City St. Louis	State MO	
Zip Code 63101	Purpose of Disbursement Political Event: Lodging and Venue Expense	Transaction ID : SB17.12948.1
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2013
Mailing Address 300 First STI, SE		Amount of Each Disbursement this Period 550.95
City Washington DC	State DC	
Zip Code 20003	Purpose of Disbursement Event Expense: Food & Beverage	Transaction ID : SB17.12948.8
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3653.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2013
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 313.90
City Fort Worth	State TX Zip Code 76155	
Purpose of Disbursement Political Travel: Airfare		Transaction ID : SB17.12948.10 <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	Category/Type
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. U.S. Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2013
Mailing Address 4000 E Sky Harbour		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Bag Charge		Transaction ID : SB17.12948.12 <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	Category/Type
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. Missouri Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 105 East High		Amount of Each Disbursement this Period 235.00
City Jefferson City	State MO Zip Code 65101	
Purpose of Disbursement Registration: Lincoln Days		Transaction ID : SB17.12948.15 <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	Category/Type
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mailchimp</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013
Mailing Address 530 Means St.		Amount of Each Disbursement this Period 240.00
City Atlanta	State GA	
Zip Code 30318	Purpose of Disbursement Email Communications Support	Transaction ID : SB17.12948.16
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2013
Mailing Address 15894 Manchester Road		Amount of Each Disbursement this Period 127.52
City Ellisville	State MO	
Zip Code 63011	Purpose of Disbursement Event Supplies	Transaction ID : SB17.12948.17
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>C. Jimco</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2013
Mailing Address 405 Washington Ave. 10th Floor		Amount of Each Disbursement this Period 983.27
City St. Louis	State MO	
Zip Code 63102	Purpose of Disbursement Promotional Item Printing	Transaction ID : SB17.12948.18
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MO	District: 02	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2013
Mailing Address 15894 Manchester Road		Amount of Each Disbursement this Period 28.74
City Ellisville	State MO	
Zip Code 63011	Purpose of Disbursement Lincoln Day Supplies	Transaction ID : SB17.12948.21
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2013
Mailing Address 15894 Manchester Road		Amount of Each Disbursement this Period -18.15
City Ellisville	State MO	
Zip Code 63011	Purpose of Disbursement Credit	Transaction ID : SB17.12948.22
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. A Storage Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2013
Mailing Address 14086 Manchester Road		Amount of Each Disbursement this Period 165.00
City Ballwin	State MO	
Zip Code 63011	Purpose of Disbursement Storage	Transaction ID : SB17.12948.24
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Randalls Wine &amp; Spirits</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2013
Mailing Address 1910 S. Jefferson		Amount of Each Disbursement this Period 309.81
City St. Louis	State MO	
Zip Code 63104	Purpose of Disbursement Lincoln Day Supplies	Transaction ID : SB17.12948.26
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Party City</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2013
Mailing Address 15894 Manchester Road		Amount of Each Disbursement this Period 61.10
City Ellisville	State MO	
Zip Code 63011	Purpose of Disbursement Lincoln Day Supplies	Transaction ID : SB17.12948.28
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. McArthurs Bakery</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2013
Mailing Address 3055 Lemay Ferry Road		Amount of Each Disbursement this Period 92.76
City St. Louis	State MO	
Zip Code 63125	Purpose of Disbursement Lincoln Day Supplies	Transaction ID : SB17.12948.32
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO	District: 02	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Endis Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 3002 East Sunshine Ave.		Amount of Each Disbursement this Period 275.00 <b>Transaction ID : SB17.12833</b>
City Springfield	State MO Zip Code 65804	
Purpose of Disbursement Credit Card Settlement Fees & Hosting		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Endis Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 3002 East Sunshine Ave.		Amount of Each Disbursement this Period 275.00 <b>Transaction ID : SB17.12840</b>
City Springfield	State MO Zip Code 65804	
Purpose of Disbursement Credit Card Settlement Fees & Hosting		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>C. Kinetic 5</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 1442 S. Glenstone Suite 3524		Amount of Each Disbursement this Period 252.45 <b>Transaction ID : SB17.12836</b>
City Springfield	State MO Zip Code 65804	
Purpose of Disbursement Website Hosting		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	802.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Laura Kleffner</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013
Mailing Address PO Box 50		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.12972</b>
City Ballwin	State MO	
Purpose of Disbursement Operational Support Retainer		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Christian Morgan</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address P.O. Box 50		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.12837</b>
City Ballwin	State MO	
Purpose of Disbursement Operational & Organizational Consulting		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

Full Name (Last, First, Middle Initial) <b>c. Christian Morgan</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2013
Mailing Address P.O. Box 50		Amount of Each Disbursement this Period 7138.08 <b>Transaction ID : SB17.12838</b>
City Ballwin	State MO	
Purpose of Disbursement December Net Wages		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8188.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 101		
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Christian Morgan</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2013
Mailing Address P.O. Box 50		Amount of Each Disbursement this Period 401.61 <b>Transaction ID : SB17.12842</b>
City Ballwin	State MO	
Zip Code 63022		Category/ Type
Purpose of Disbursement Reimbursement for Final 2012 Expenses: See Below		
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2012
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 207.89 <b>Transaction ID : SB17.12842.2</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75235		Category/ Type
Purpose of Disbursement Political Travel: Airfare		
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 11 / 12 / 2012
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 177.80 <b>Transaction ID : SB17.12842.3</b> <b>[MEMO ITEM]</b>
City Dallas	State TX	
Zip Code 75235		Category/ Type
Purpose of Disbursement Political Travel: Airfare		
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	401.61
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. St. Charles County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013
Mailing Address 41 Oak Forest Drive		Amount of Each Disbursement this Period 675.00 <b>Transaction ID : SB17.12943</b>
City Saint Charles	State MO	
Zip Code 63303	Purpose of Disbursement Dinner Tickets	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>B. St. Louis County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2013
Mailing Address 1345 Willow Brook Dr.		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.12974</b>
City Florissant	State MO	
Zip Code 63033	Purpose of Disbursement Sponsorship	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>c. The Bespoke Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 140 Walnut Suite 202		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : SB17.12938</b>
City Kansas City	State MO	
Zip Code 64106	Purpose of Disbursement FEC Compliance	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3075.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Bespoke Group</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 140 Walnut Suite 202		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : SB17.12944</b>
City Kansas City State MO Zip Code 64106	Purpose of Disbursement FEC Compliance	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. The Bespoke Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2013
Mailing Address 140 Walnut Suite 202		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : SB17.12847</b>
City Kansas City State MO Zip Code 64106	Purpose of Disbursement FEC Compliance	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. The Congressional Institute</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address 1700 Diagnol Road #703		Amount of Each Disbursement this Period 675.30 <b>Transaction ID : SB17.12951</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Retreat Registration	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4175.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Goodson Company</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2013
Mailing Address 1935 Park Avenue		Amount of Each Disbursement this Period 207.89 <b>Transaction ID : SB17.12953</b>
City St. Louis	State MO	
Zip Code 63104	Purpose of Disbursement Printing	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>B. The Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 499 S Capitol St. SW Ste 420		Amount of Each Disbursement this Period 2843.70 <b>Transaction ID : SB17.12955</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Reimbursement: See Below	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>c. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2013
Mailing Address 3635 Ruffin Road		Amount of Each Disbursement this Period 105.00 <b>Transaction ID : SB17.12955.0</b> <b>[MEMO ITEM]</b>
City San Diego	State CA	
Zip Code 92123	Purpose of Disbursement IT Support and Fax Expenses	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3051.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2013
Mailing Address 300 First STI, SE		Amount of Each Disbursement this Period 24.22
City Washington DC	State DC	
Purpose of Disbursement Event Expense: Meals		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	State: MO	District: 02

Full Name (Last, First, Middle Initial) <b>B. St. Louis Cardinals</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 700 Clark Ave.		Amount of Each Disbursement this Period 500.00
City St. Louis	State MO	
Purpose of Disbursement Event Expense: Tickets		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	State: MO	District: 02

Full Name (Last, First, Middle Initial) <b>c. Four Seasons St. Louis</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 999 N. 2nd St.		Amount of Each Disbursement this Period 1500.00
City St. Louis	State MO	
Purpose of Disbursement Event Expense: Venue Deposit		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House	State: MO	District: 02

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2013
Mailing Address 300 First STI, SE			Amount of Each Disbursement this Period 14.48
City Washington DC	State DC	Zip Code 20003	
Purpose of Disbursement Event Expense: Meals		Category/ Type	<b>Transaction ID : SB17.12955.5</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO	District: 02		

Full Name (Last, First, Middle Initial) <b>B. The Liaison</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2013
Mailing Address 415 New Jersey Ave. NW			Amount of Each Disbursement this Period 300.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Event Expense: Food & Beverage		Category/ Type	<b>Transaction ID : SB17.12955.6</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO	District: 02		

Full Name (Last, First, Middle Initial) <b>c. Johnny's Half Shell</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address North Capitol SW			Amount of Each Disbursement this Period 200.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Event Expense: Food & Beverage		Category/ Type	<b>Transaction ID : SB17.12955.7</b> <b>[MEMO ITEM]</b>
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO	District: 02		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 499 S Capitol St. SW Ste 420		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.12956</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Fee	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. The Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 499 S Capitol St. SW Ste 420		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : SB17.12957</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Fee	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. The Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 499 S Capitol St. SW Ste 420		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.12958</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Fee	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4120.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 499 S Capitol St. SW Ste 420		Amount of Each Disbursement this Period 7057.61 <b>Transaction ID : SB17.12959</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimbursement: See Below	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>B. Complete Campaigns</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 3635 Ruffin Road		Amount of Each Disbursement this Period 115.00 <b>Transaction ID : SB17.12959.0</b>
City San Diego State CA Zip Code 92123	Purpose of Disbursement IT Support and Fax Expenses	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

Full Name (Last, First, Middle Initial) <b>c. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2013
Mailing Address 601 Pennsylvania Ave.		Amount of Each Disbursement this Period 926.10 <b>Transaction ID : SB17.12959.1</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7057.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sonoma</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2013
Mailing Address 223 Pennsylvania SE		Amount of Each Disbursement this Period 718.20
City Washington State DC Zip Code 20004	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.2 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2013
Mailing Address 942 South Shady Grove Road		Amount of Each Disbursement this Period 17.11
City Memphis State TN Zip Code 38120	Purpose of Disbursement Shipping	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.3 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 335.80
City Fort Worth State TX Zip Code 76155	Purpose of Disbursement Political Travel: Airfare	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.4 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Cornerstone Government Affairs</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 300 Independence Ave. SE		Amount of Each Disbursement this Period 300.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Event Expense: Room Rental Fee	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.5 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 601 Pennsylvania Ave.		Amount of Each Disbursement this Period 912.60
City Washington State DC Zip Code 20004	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.6 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Acqua AI 2</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 1950.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.7 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 101			
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2013
Mailing Address 601 Pennsylvania Ave.		Amount of Each Disbursement this Period 1782.80
City Washington State DC Zip Code 20004	Purpose of Disbursement Event Expense: Food & Beverage	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12959.8  [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Thomson Printing Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013
Mailing Address 601 N. Kingshighway		Amount of Each Disbursement this Period 176.22
City St. Charles State MO Zip Code 63301	Purpose of Disbursement Printing	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12976
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Westrich Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2013
Mailing Address 7925 Clayton Road		Amount of Each Disbursement this Period 200.00
City Saint Louis State MO Zip Code 63117	Purpose of Disbursement Photography Services	
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		Transaction ID : SB17.12945
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	376.22
<b>TOTAL</b> This Period (last page this line number only).....	62720.76

**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 99 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capito For West Virginia</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2013
Mailing Address P.O. Box 11519		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.12968</b>
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>B. Friends of Dave Joyce</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2013
Mailing Address 12550 Concord Hamden Road		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.13348</b>
City Shardon	State OH	
Zip Code 44024	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF TREY RADEL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2013
Mailing Address P.O. BOX 1329		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.12970</b>
City FORT MYERS	State FL	
Zip Code 33902	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jason Smith For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2013
Mailing Address P.O. Box 1324		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.12843</b>
City Cape Girardeau	State MO	
Zip Code 65702	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>B. ROTHFUS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2013
Mailing Address PO BOX 435		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.13350</b>
City SEWICKLEY	State PA	
Zip Code 15143	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

Full Name (Last, First, Middle Initial) <b>C. VALADAO FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2013
Mailing Address 504 VAN NESS		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.13351</b>
City FRESNO	State CA	
Zip Code 93721	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 101	
	<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)  
**ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WALORSKI FOR CONGRESS INC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 28 / 2013</b>
Mailing Address <b>PO BOX 954</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB21.13353</b>
City <b>MISHAWAKA</b> State <b>IN</b> Zip Code <b>46546</b>	Purpose of Disbursement Contribution	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>IN</b> District: <b>02</b>		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>9000.00</b>