

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 AUSTIN SCOTT FOR CONGRESS INC

ADDRESS (number and street) PO BOX 2530 TIFTON GA 31793 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00482737 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT GA 08

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

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 11 / 06 / 2018 in the State of GA (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 10 / 01 / 2018 through 10 / 17 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer SCOTT, VIVIEN, , MRS., Signature of Treasurer SCOTT, VIVIEN, , MRS., [Electronically Filed] Date 10 / 25 / 2018

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**AUSTIN SCOTT FOR CONGRESS INC**

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))....	19525.00	791078.50
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	19525.00	789578.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2500.00	437914.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2500.00	437914.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	622285.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**AUSTIN SCOTT FOR CONGRESS INC**

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).....	500.00	188938.00
(ii) Unitemized.....	25.00	6990.50
(iii) TOTAL of contributions from individuals ▶	525.00	195928.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	19000.00	595150.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	19525.00	791078.50
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<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>	19525.00	791078.50

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2500.00	437914.14
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	1500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1500.00
21. OTHER DISBURSEMENTS .....	17000.00	193950.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	19500.00	633364.14

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	622260.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19525.00
25. SUBTOTAL (add Line 23 and Line 24).....	641785.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19500.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	622285.63

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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

NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

**A.** Full Name (Last, First, Middle Initial)  
**BELL, J. ALEX, , ,**

Mailing Address 328 MARGIE DR, STE A

City Warner Robins State GA Zip Code 31088-8934

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

Name of Employer FAMILY DENTAL ASSOCIATES Occupation DENTIST

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 17 2018

**Transaction ID : A206DA2FB8055429B8A7**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

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

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NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

**A.** Full Name (Last, First, Middle Initial)  
**FRATERNITY & SORORITY PAC**

Mailing Address PO BOX 3435

City ALEXANDRIA	State VA	Zip Code 22302-0435
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FEC ID number of contributing federal political committee. **C** C00410068

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

**Transaction ID : A1F2AC77C28B54936B64**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ELECT - THE PAC OF THE ALABAMA FARMERS FEDERATION**

Mailing Address P. O. BOX 11000

City MONTGOMERY	State AL	Zip Code 36191-0001
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00094573

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

**Transaction ID : A9976DEE30A1F4DB797F**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 13515 YARMOUTH DR

City PICKERINGTON	State OH	Zip Code 43147-8214
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FEC ID number of contributing federal political committee. **C** C00120238

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

**Transaction ID : ACDAC297CE2FF46E19A5**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<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 7 OF 15	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL PRO-LIFE ALLIANCE PAC**

Mailing Address 4521 WINDSOR ARMS CT

City ANNANDALE	State VA	Zip Code 22003-5751
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FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : AE39A760FCBB74B8C979**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GEORGIA POWER CO. FEDERAL PAC**

Mailing Address 241 RALPH MCGILL BLVD NE

City ATLANTA	State GA	Zip Code 30308-3374
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FEC ID number of contributing federal political committee. **C** C00119776

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : AD53135F8C6EC461A901**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 520 N NORTHWEST HWY

City PARK RIDGE	State IL	Zip Code 60068-2538
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FEC ID number of contributing federal political committee. **C** C00255752

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : AC13B1F49BFEF4A7B9E3**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<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 8 OF 15	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

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

Mailing Address 20 S WACKER DR

City CHICAGO	State IL	Zip Code 60606-7431
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FEC ID number of contributing federal political committee. **C** C00076299

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : A5A6FDC25FC044B648F2**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)**

Mailing Address 4301 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203-1867
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FEC ID number of contributing federal political committee. **C** C00002972

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : A0C7A5E80D3404E5CB99**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND PAC**

Mailing Address 1331 PENNSYLVANIA AVE NW  
STE 560

City WASHINGTON	State DC	Zip Code 20004-1745
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FEC ID number of contributing federal political committee. **C** C00163832

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : AB47E8225167C4BC0848**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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 9 OF 15	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOC. PAC**

Mailing Address 100 DAINGERFIELD RD

City ALEXANDRIA	State VA	Zip Code 22314-2886
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FEC ID number of contributing federal political committee. **C** C00030809

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : AEFADC07179144D49A54**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC FEDERAL PAC**

Mailing Address 208 S AKARD ST  
ATTN: BARRY HUTCHISON

City DALLAS	State TX	Zip Code 75202-4206
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FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : A6DFB3292570542FD8C7**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City WASHINGTON	State DC	Zip Code 20005-4171
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FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2018

**Transaction ID : A5A459EA0F098499D8C3**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	19000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 15	
	<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)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. PROFESSIONAL DATA SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING		001
Candidate Name		Amount of Each Disbursement this Period 1501.88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CARPENTER ROAD SELF-STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2018
Mailing Address 3159 CARPENTER ROAD S		FEC Identification Number C
City TIFTON	State GA	Zip Code 31793-8167
Purpose of Disbursement STORAGE FACILITY RENTAL		001
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TRANSFIRST LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2018
Mailing Address 1393 VETERANS HWY		FEC Identification Number C
City HAUPPAUGE	State NY	Zip Code 11788-3042
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 25.35
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1627.23
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 15			
	<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)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2018		
Mailing Address 140 WEST ST			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10007-2141	Amount of Each Disbursement this Period 474.99		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : B58DBA8A51F824634AB0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2018		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 1.28		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BF0914129B1B642C1B59		
Candidate Name		Memo Item <input type="checkbox"/>			
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. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2018		
Mailing Address 140 WEST ST			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10007-2141	Amount of Each Disbursement this Period 30.16		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : B7510BFE07D9A494FBBD		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	506.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)  
 17     18     19a     19b  
                   20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2018		
Mailing Address 300 1ST ST SE			FEC Identification Number <b>C</b>		
City WASHINGTON		State DC			
Purpose of Disbursement MEETING EXPENSE			Amount of Each Disbursement this Period 366.34		
Candidate Name			Transaction ID : <b>B4B914631AF8F4F3F938</b>		
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:		<input type="checkbox"/> Memo Item			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	366.34
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 15	
	<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)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. ANDY BARR FOR CONGRESS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address PO BOX 2059			FEC Identification Number C C00467571	
City LEXINGTON	State KY	Zip Code 40588-2059	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : BB50534F44D5844A2B29	
Candidate Name <b>BARR, GARLAND, ANDY, ,</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: KY District: 06				

Full Name (Last, First, Middle Initial) <b>B. WALTERS FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address 9070 IRVINE CENTER DR STE 150			FEC Identification Number C C00546853	
City IRVINE	State CA	Zip Code 92618-4691	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B1EA0D9E7EC454908985	
Candidate Name <b>WALTERS, MIMI, , ,</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 45				

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SUSAN BROOKS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address 9425 N MERIDIAN ST # 237			FEC Identification Number C C00500207	
City INDIANAPOLIS	State IN	Zip Code 46260-1308	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : BA26A43414F9B4ED2980	
Candidate Name <b>BROOKS, SUSAN, MRS., ,</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IN District: 05				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<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 14 OF 15	
	<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)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MIA LOVE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address 913 WEST GROUSE CIRCLE			FEC Identification Number C C00505776	
City SARATOGA SPRINGS	State UT	Zip Code 84045	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B0D69C940FC2648098F3	
Candidate Name LOVE, MIA, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: UT District: 04				

Full Name (Last, First, Middle Initial) <b>B. ANN WAGNER FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address PO BOX 50			FEC Identification Number C C00495846	
City BALLWIN	State MO	Zip Code 63022-0050	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B271D5B62313A43E3919	
Candidate Name WAGNER, ANN, L., ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MO District: 02				

Full Name (Last, First, Middle Initial) <b>C. DENHAM FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2018	
Mailing Address 2150 RIVER PLAZA DR., #150			FEC Identification Number C C00473272	
City SACRAMENTO	State CA	Zip Code 95833	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B19F90F4F36C84AFC9F2	
Candidate Name DENHAM, JEFF, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 19				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<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 15 OF 15
	<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)  
**AUSTIN SCOTT FOR CONGRESS INC**

Full Name (Last, First, Middle Initial) <b>A. DUNCAN FOR GEORGIA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2018
Mailing Address 2146 CENTRAL AVE		FEC Identification Number C
City AUGUSTA	State GA	Zip Code 30904-6705
Purpose of Disbursement CONTRIBUTION(STATE/LOCAL COMMITTEE)		Category/ Type 011
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B518EE88A677E4505B5F
State: District:		<input type="checkbox"/> Memo Item

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17000.00