

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

Andy Harris for Congress

ADDRESS (number and street)

PO Box 604

Check if different than previously reported. (ACC)

Bel Air

MD

21014

2. FEC IDENTIFICATION NUMBER ▼

C C00435974

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MD

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 James Depew

Signature of Treasurer James Depew

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Andy Harris 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))....	79505.00	990592.04
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	79505.00	989592.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	22668.50	405754.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4236.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	22668.50	401518.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	727958.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

Andy Harris for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22900.00	513357.78
(ii) Unitemized	3105.00	96659.08
(iii) TOTAL of contributions from individuals	26005.00	610016.86
(b) Political Party Committees.....	0.00	999.00
(c) Other Political Committees (such as PACs).....	53500.00	379576.18
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	79505.00	990592.04
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	4236.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	98.94	1082.61
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	79603.94	995910.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22668.50	405754.73
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	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS	21706.50	85706.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	44375.00	492461.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	692729.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	79603.94
25. SUBTOTAL (add Line 23 and Line 24).....	772333.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44375.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	727958.47

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Abdun-nabi

Mailing Address 11504 Dalyn Ter

City Potomac State MD Zip Code 20854-1179

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40707.C37343

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
Brooke Albright

Mailing Address 504 Chieftain Ct

City Woodstock State GA Zip Code 30188-3134

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

Name of Employer Dept Of Defense Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37234

Amount of Each Receipt this Period
 Receipt 100.00

C. Full Name (Last, First, Middle Initial)
Brooke Albright

Mailing Address 504 Chieftain Ct

City Woodstock State GA Zip Code 30188-3134

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

Name of Employer Dept Of Defense Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40707.C37350

Amount of Each Receipt this Period
 Receipt 100.00

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

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

1200.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Archilla

Mailing Address 10925 Woodchase Cir

City Orlando	State FL	Zip Code 32836-5822
-----------------	-------------	------------------------

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

Name of Employer Nemours	Occupation Anesthesiologist
-----------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37235

Amount of Each Receipt this Period
 Receipt
 100.00

B. Full Name (Last, First, Middle Initial)
Carlos Archilla

Mailing Address 10925 Woodchase Cir

City Orlando	State FL	Zip Code 32836-5822
-----------------	-------------	------------------------

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

Name of Employer Nemours	Occupation Anesthesiologist
-----------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37299

Amount of Each Receipt this Period
 Receipt
 195.00

C. Full Name (Last, First, Middle Initial)
Mac Axelrod

Mailing Address 8703 Palm Lake Dr

City Orlando	State FL	Zip Code 32819-3813
-----------------	-------------	------------------------

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

Name of Employer JLR Medical Group	Occupation Anesthesiologist
---------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37236

Amount of Each Receipt this Period
 Receipt
 250.00

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

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

545.00

**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 55
	<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)
Andy Harris for Congress

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

Mailing Address PO Box 158201

City Nashville State TN Zip Code 37215-8201

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

Name of Employer Vanderbilt University Medical Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37305

Amount of Each Receipt this Period
 Receipt **125.00**

B. Full Name (Last, First, Middle Initial)
A. Kirk Bodary

Mailing Address 2070 Risser Rd

City Canandaigua State NY Zip Code 14424-8087

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : 40623.C37271

Amount of Each Receipt this Period
 Receipt **250.00**

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

Mailing Address 1610 Angleside Rd

City Fallston State MD Zip Code 21047-1744

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

Name of Employer Davco Restaurants Occupation Executive 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
 06 / 30 / 2014

Transaction ID : 40702.C37324

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

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

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

1375.00

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

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

FOR LINE NUMBER: PAGE 8 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

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

Mailing Address 3621 Blue Hill Ct

City State Zip Code
Ellicott City MD 21042-3901

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 21 / 2014

Transaction ID : 40623.C37272

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Deborah Burrell

Mailing Address 1945 Crossing Stone Ct

City State Zip Code
Frederick MD 21702-6100

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

Name of Employer Occupation
ATS, LLC Senior Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : 40707.C37347

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 2065 Venetian Way

City State Zip Code
Winter Park FL 32789-1216

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

Name of Employer Occupation
Sheridan Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1375.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37314

Amount of Each Receipt this Period
250.00

Receipt

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

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

550.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Jerry Cohen

Mailing Address 2358 NW 14th Pl

City Gainesville State FL Zip Code 32605-5146

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

Name of Employer University of Florida Occupation Physician

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
 06 / 20 / 2014

Transaction ID : 40623.C37256

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 1455 Pennsylvania Ave NW Ste 1200

City Washington State DC Zip Code 20004-1034

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

Name of Employer Information Requested Occupation Information Requested

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
 06 / 30 / 2014

Transaction ID : 40707.C37348

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Joshua Denison

Mailing Address 8911 Oxon Hill Rd

City Fort Washington State MD Zip Code 20744-4704

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

Name of Employer Denison Landscaping Occupation HR/Operations Manager

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
 06 / 06 / 2014

Transaction ID : 40609.C37213

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
C. Lee Ferrell

Mailing Address **PO Box 50420**

City **Nashville** State **TN** Zip Code **37205-0420**

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

Name of Employer **AMG** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37240

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address **2496 W Bayshore Rd**

City **Gulf Breeze** State **FL** Zip Code **32563-2524**

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

Name of Employer **Panhandle Medical Services** Occupation **Anesthesiologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37241

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Craig Fisher

Mailing Address **4006 Sperry St**

City **Dallas** State **TX** Zip Code **75214-2740**

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

Name of Employer **Metro Anesthesia** Occupation **Anesthesiologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37242

Amount of Each Receipt this Period
250.00

Receipt

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

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

750.00

**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)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Ted Frey

Mailing Address **PO Box 889004**

City **Atlanta** State **GA** Zip Code **30356-1004**

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

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37301

Amount of Each Receipt this Period
 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Christopher Galuardi

Mailing Address **305 Powell Cir**

City **Berlin** State **MD** Zip Code **21811-1186**

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

Name of Employer **Berlin Pain Management** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37243

Amount of Each Receipt this Period
 500.00

Receipt

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

Mailing Address **3231 W Fountain Blvd**

City **Tampa** State **FL** Zip Code **33609-4620**

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

Name of Employer **All Childrens Specialty** Occupation **Anesthesiologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 21 / 2014

Transaction ID : 40623.C37274

Amount of Each Receipt this Period
 250.00

Receipt

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 12 OF 55
	<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)
Andy Harris for Congress

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

Mailing Address 2290 10th Ave N Ste 600

City Lake Worth State FL Zip Code 33461-6618

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

Name of Employer Self Employed Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40623.C37259

Amount of Each Receipt this Period
150.00

Receipt

B. Full Name (Last, First, Middle Initial)
Steven Gottlieb

Mailing Address 7645 Hawks Landing Dr

City West Palm Beach State FL Zip Code 33412-3151

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

Name of Employer TeamHealth Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37298

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 2134 Terrace Dr

City Highlands Ranch State CO Zip Code 80126-2695

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

Name of Employer South Denver Anesthesiologists Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40623.C37260

Amount of Each Receipt this Period
250.00

Receipt

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

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

1400.00

**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 55
	<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)
Andy Harris for Congress

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

Mailing Address 9027 W 114th St

City Overland Park State KS Zip Code 66210-1764

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

Name of Employer Anesthesia Associates Of KC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40623.C37261

Amount of Each Receipt this Period
 Receipt **150.00**

B. Full Name (Last, First, Middle Initial)
Raymond Haroun

Mailing Address 8217 Pumpkin Hill Ct

City Pikesville State MD Zip Code 21208-1872

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

Name of Employer Maryland Spine & Brain Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : 40623.C37276

Amount of Each Receipt this Period
 Receipt **250.00**

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

Mailing Address 519 Wing Ln

City Saint Charles State IL Zip Code 60174-2339

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

Name of Employer Kane Anesthesia Assoc Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2014

Transaction ID : 40702.C37331

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

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

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

1900.00

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

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

FOR LINE NUMBER: PAGE 14 OF 55
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

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

Mailing Address 305 Panferio Dr

City State Zip Code
Gulf Breeze FL 32561-2159

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

Name of Employer Occupation
Self Employed Physician

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
 06 / 24 / 2014

Transaction ID : 40702.C37300

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 3938 Blackstone Ct

City State Zip Code
Hayward CA 94542-1360

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37245

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 3938 Blackstone Ct

City State Zip Code
Hayward CA 94542-1360

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37289

Amount of Each Receipt this Period
 Receipt 100.00

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

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

600.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Madeline Kerr

Mailing Address 3214 Riverside Ave

City Jacksonville	State FL	Zip Code 32205-8628
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer North Florida Anesthesia	Occupation Anesthesiologist
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40702.C37292

Amount of Each Receipt this Period

Receipt

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

Mailing Address 7594 E 9th Ave

City Denver	State CO	Zip Code 80230-7037
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer Greater Colorado Anesthesia	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40702.C37288

Amount of Each Receipt this Period

Receipt

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

Mailing Address 2241 Brown Deer Rd

City Coralville	State IA	Zip Code 52241-3346
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer University of IA Hospital	Occupation Anesthesiologist
---	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 40623.C37262

Amount of Each Receipt this Period

Receipt

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

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 16 OF 55

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Le Fevers

Mailing Address 175 Cardamon Dr

City Edgewater State MD Zip Code 21037-1134

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

Name of Employer Gas Technologies Institute Occupation Executive Director

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
 06 / 20 / 2014

Transaction ID : 40620.C37230

Amount of Each Receipt this Period
 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Peter Lorenzi

Mailing Address 601 Oak Farm Ct

City Luthvle Timon State MD Zip Code 21093-7004

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

Name of Employer Loyola College Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2014

Transaction ID : 40702.C37328

Amount of Each Receipt this Period
 400.00

Receipt

C. Full Name (Last, First, Middle Initial)
Devanand Mangar

Mailing Address 360 Blanca Ave

City Tampa State FL Zip Code 33606-3630

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

Name of Employer FGTA Occupation Anesthesiologist

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
 06 / 24 / 2014

Transaction ID : 40702.C37306

Amount of Each Receipt this Period
 500.00

Receipt

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Kurt Markgraf

Mailing Address 3663 McKinley Ave

City State Zip Code
Fort Myers FL 33901-7813

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

Name of Employer Occupation
Mapmc Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37295

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Meeks

Mailing Address PO Box 2111

City State Zip Code
Salisbury MD 21802

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

Name of Employer Occupation
Delaware Elevator, Inc. Owner/president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37284

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Rafael Miguel

Mailing Address 25 S Treasure Dr

City State Zip Code
Tampa FL 33609-3508

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

Name of Employer Occupation
University Of South Florida Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37313

Amount of Each Receipt this Period
250.00

Receipt

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

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

700.00

**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 55
	<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)
Andy Harris for Congress

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

Mailing Address 3142 Rock Park Dr

City State Zip Code
Fort Collins CO 80528-9483

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

Name of Employer Occupation
Northern CO Anesthesia Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37247

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Sathyendra Mysore

Mailing Address 40 Woods Edge Cir

City State Zip Code
London KY 40741-8146

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

Name of Employer Occupation
KY1 Hospital System Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : 40623.C37263

Amount of Each Receipt this Period
300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Emery Navori

Mailing Address 412 S Paloma Pl

City State Zip Code
Tampa FL 33609-3712

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

Name of Employer Occupation
FL Gulf to Bay Anesthesia Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : 40623.C37264

Amount of Each Receipt this Period
250.00

Receipt

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

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

800.00

**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 19 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Kathryn Norman

Mailing Address 703 Benston Pl

City Baltimore State MD Zip Code 21210-1414

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40702.C37323

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 4203 Atlantic Ave Unit 2

City Ocean City State MD Zip Code 21842-6402

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

Name of Employer LLTW, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37287

Amount of Each Receipt this Period
 Receipt 200.00

C. Full Name (Last, First, Middle Initial)
Carolyn Osolinik

Mailing Address 7834 Hampden Ln

City Bethesda State MD Zip Code 20814-1109

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40620.C37229

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Parker

Mailing Address PO Box 691

City State Zip Code
Ocean City MD 21843

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

Name of Employer Occupation
Casual Designs Furniture Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37285

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Devang Patel

Mailing Address 7610 Bogard Ct

City State Zip Code
Sugar Land TX 77479-6689

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

Name of Employer Occupation
GHA Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : 40623.C37233

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 501 Glades Rd

City State Zip Code
Boca Raton FL 33432-1419

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : 40702.C37329

Amount of Each Receipt this Period
250.00

Receipt

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 21 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
William Purkey, Jr

Mailing Address 5445 Pine Hollow Trl

City: Oviedo State: FL Zip Code: 32765-8750

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

Name of Employer: JLR Medical Group Occupation: Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 19 / 2014

Transaction ID : 40623.C37248

Amount of Each Receipt this Period: 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Alvin Ralston

Mailing Address 15 Hedwig Cir

City: Houston State: TX Zip Code: 77024-4521

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

Name of Employer: Greater Houston Anesthesiology Occupation: Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 19 / 2014

Transaction ID : 40623.C37249

Amount of Each Receipt this Period: 500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jeffrey Reed

Mailing Address 12516 Deep Wood Creek Dr

City: Oklahoma City State: OK Zip Code: 73142-4000

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

Name of Employer: Self Employed Occupation: Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 22 / 2014

Transaction ID : 40623.C37280

Amount of Each Receipt this Period: 250.00

Receipt

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 22 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Rosen

Mailing Address 738 W 50th St

City Miami Beach State FL Zip Code 33140-2608

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

Name of Employer MBAA Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37250

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Harvey Rothstein

Mailing Address 1657 Crofton Blvd

City Crofton State MD Zip Code 21114-1305

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

Name of Employer Davco Restaurants 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
 06 / 30 / 2014

Transaction ID : 40702.C37325

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Harry Sherman

Mailing Address 36 Collins Ridge Dr

City Greenville State SC Zip Code 29607-3775

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

Name of Employer Greenville Anesthesiology Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40623.C37251

Amount of Each Receipt this Period
250.00

Receipt

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 55
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Kirsten Simanonok		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address N78W14573 Appleton Ave # 212		Transaction ID : 40623.C37252	
City Menomonee Falls	State WI	Zip Code 53051-4382	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 150.00	
Name of Employer Self Employed	Occupation Anesthesiologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) B. Paul Skaff		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 28 Norwood Rd		Transaction ID : 40623.C37253	
City Charleston	State WV	Zip Code 25314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 100.00	
Name of Employer General Anesthesia Services	Occupation Anesthesiologist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. Bradley Smith		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2014	
Mailing Address 837 Forest Hills Dr		Transaction ID : 40623.C37266	
City Nashville	State TN	Zip Code 37220-2117	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 125.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 55
	<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)
Andy Harris for Congress

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

Mailing Address 837 Forest Hills Dr

City Nashville State TN Zip Code 37220-2117

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37290

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address 3821 Byrnes Blvd

City Florence State SC Zip Code 29506-8304

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

Name of Employer McLeod Med Anes. Consultants Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : 40623.C37281

Amount of Each Receipt this Period
600.00

Receipt

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

Mailing Address 3821 Byrnes Blvd

City Florence State SC Zip Code 29506-8304

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

Name of Employer McLeod Med Anes. Consultants Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2014

Transaction ID : 40623.C37282

Amount of Each Receipt this Period
400.00

Receipt

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

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

1125.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Steven Soule

Mailing Address 7152 Ridgecrest Ct

City State Zip Code
Ventura CA 93003-1433

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : 40623.C37267

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Paul Steinberg

Mailing Address 76 1/2 Cedar Dr

City State Zip Code
Great Neck NY 11021-2840

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : 40623.C37254

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Jack Stoltz

Mailing Address 24795 Deep Neck Rd

City State Zip Code
Royal Oak MD 21662-1332

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

Name of Employer Occupation
Stoltz Realty Partners Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : 40702.C37326

Amount of Each Receipt this Period
500.00

Receipt

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

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

700.00

**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 55
	<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)
Andy Harris for Congress

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

Mailing Address 2439 Roat Dr

City Orlando State FL Zip Code 32835-8145

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

Name of Employer JLR Medical Group Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2014

Transaction ID : 40616.C37219

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 1303 Bayshore Blvd

City Tampa State FL Zip Code 33606-2911

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

Name of Employer Unicom Anesthesia Assoc. Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37312

Amount of Each Receipt this Period
 Receipt 250.00

C. Full Name (Last, First, Middle Initial)
Hector Vila

Mailing Address 4304 W Azelee St

City Tampa State FL Zip Code 33609-3824

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

Name of Employer PDAA Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
515.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37311

Amount of Each Receipt this Period
 Receipt 250.00

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

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

750.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Henry Walther

Mailing Address 6845 Rancho Los Pavos Ln

City State Zip Code
Granite Bay CA 95746-7349

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

Name of Employer Occupation
Case Medical Group Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : 40623.C37275

Amount of Each Receipt this Period
 Receipt **200.00**

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

Mailing Address 105 Sandgate Ct

City State Zip Code
Millersville MD 21108-2703

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

Name of Employer Occupation
Chesapeake Orthopedics Orthopedist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2014

Transaction ID : 40622.C37231

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

C. Full Name (Last, First, Middle Initial)
Mark Zakowski

Mailing Address 10115 Rossbury Pl

City State Zip Code
Los Angeles CA 90064-4827

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

Name of Employer Occupation
Self Employed Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40623.C37270

Amount of Each Receipt this Period
 Receipt **180.00**

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

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

1380.00

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

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

FOR LINE NUMBER: PAGE 28 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Zarrelli

Mailing Address 276 Jefferson Pl

City State Zip Code
Bethlehem PA 18020-8974

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

Name of Employer Occupation
Professional Anesthesia Physician

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
 06 / 19 / 2014

Transaction ID : 40623.C37255

Amount of Each Receipt this Period
 Receipt 250.00

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).....

250.00

22900.00

**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 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Action Comm. for Rural Electrification

Mailing Address 4301 Wilson Blvd

City State Zip Code
Arlington VA 22203-1867

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 40620.C37227

Amount of Each Receipt this Period
 Receipt
 1000.00

B. Full Name (Last, First, Middle Initial)
Alzheimers Impact Movement PAC

Mailing Address 225 N Michigan Ave Fl 17

City State Zip Code
Chicago IL 60601-7652

FEC ID number of contributing federal political committee. **C C00486928**

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
 06 / 24 / 2014

Transaction ID : 40707.C37337

Amount of Each Receipt this Period
 Receipt
 1000.00

C. Full Name (Last, First, Middle Initial)
American College of Radiology PAC

Mailing Address 1891 Preston White Dr

City State Zip Code
Reston VA 20191-4326

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : 40620.C37228

Amount of Each Receipt this Period
 Receipt
 1500.00

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 30 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
American Composites Mfr Assoc. PAC

Mailing Address 3033 Wilson Blvd # 820

City State Zip Code
Arlington VA 22201-3843

FEC ID number of contributing federal political committee. **C C00388157**

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
 06 / 10 / 2014

Transaction ID : 40611.C37214

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St NW Ste 1100

City State Zip Code
Washington DC 20005-5627

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40707.C37335

Amount of Each Receipt this Period
 Receipt 1500.00

C. Full Name (Last, First, Middle Initial)
American Hotel & Lodging Assoc. PAC

Mailing Address 1201 New York Ave NW Fl 6

City State Zip Code
Washington DC 20005-3917

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40707.C37341

Amount of Each Receipt this Period
 Receipt 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
American Osteopathic Assoc. PAC

Mailing Address 1090 Vermont Ave NW Ste 510

City Washington State DC Zip Code 20005-4949

FEC ID number of contributing federal political committee. **C** C00113803

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
 06 / 24 / 2014

Transaction ID : 40707.C37339

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
American Society Of Anesthesiologist PAC

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C** C00255752

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
 06 / 24 / 2014

Transaction ID : 40702.C37297

Amount of Each Receipt this Period
 Receipt 5000.00

C. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC

Mailing Address 440 1st St NW Ste 200

City Washington State DC Zip Code 20001-2028

FEC ID number of contributing federal political committee. **C** C00010421

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
 06 / 30 / 2014

Transaction ID : 40709.C37354

Amount of Each Receipt this Period
 Receipt 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: PAGE 32 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
AVMA PAC

Mailing Address 1910 Sunderland PI NW

City Washington State DC Zip Code 20036-1608

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40709.C37353

Amount of Each Receipt this Period
 1000.00

Receipt

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

Mailing Address 601 Pennsylvania Ave NW Ste 600

City Washington State DC Zip Code 20004-2601

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 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40709.C37352

Amount of Each Receipt this Period
 1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address 8400 Westpark Dr

City West McLean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

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
 06 / 24 / 2014

Transaction ID : 40707.C37336

Amount of Each Receipt this Period
 1500.00

Receipt

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 33 OF 55
	<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)
Andy Harris for Congress

A. Emergent Biosolutions Inc. Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2273 Research Blvd Ste 400

City Rockville State MD Zip Code 20850-3285

FEC ID number of contributing federal political committee. **C C00380303**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40707.C37346

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

B. Employees of Northrop Grumman PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3699 Wilshire Blvd Ste 1290

City Los Angeles State CA Zip Code 90010-2732

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40707.C37345

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

C. Exelon PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 805379

City Chicago State IL Zip Code 60680-4179

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **8000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 40709.C37355

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

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 34 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Holland & Knight PAC

Mailing Address 800 17th St NW Ste 1100

City Washington State DC Zip Code 20006-3962

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
 06 / 10 / 2014

Transaction ID : 40611.C37215

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 101 Constitution Ave NW Ste 500

City Washington State DC Zip Code 20001-2133

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
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37321

Amount of Each Receipt this Period
1444.17

Receipt

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

Mailing Address 101 Constitution Ave NW Ste 500

City Washington State DC Zip Code 20001-2133

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
5555.83

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014

Transaction ID : 40702.C37322

Amount of Each Receipt this Period
555.83

Receipt

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Lyondell Chemical Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 McKinney St Ste 700
 City Houston State TX Zip Code 77010-2045
 FEC ID number of contributing federal political committee. **C C00306175**
 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
 06 / 18 / 2014
Transaction ID : 40619.C37226
 Amount of Each Receipt this Period
 Receipt 1500.00
 Election Cycle-to-Date 2500.00

B. Marriott International, Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 10400 Fernwood Rd
 City Bethesda State MD Zip Code 20817-1102
 FEC ID number of contributing federal political committee. **C C00284810**
 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
 06 / 18 / 2014
Transaction ID : 40619.C37224
 Amount of Each Receipt this Period
 Receipt 1000.00
 Election Cycle-to-Date 1000.00

C. National Marine Manufacturers Boat PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 N Capitol St NW Ste 645
 City Washington State DC Zip Code 20001-1559
 FEC ID number of contributing federal political committee. **C C00245548**
 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
 06 / 16 / 2014
Transaction ID : 40616.C37222
 Amount of Each Receipt this Period
 Receipt 5000.00
 Election Cycle-to-Date 10000.00

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 36 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
NRA - Political Victory Fund

Mailing Address 11250 Waples Mill Rd

City State Zip Code
Fairfax VA 22030-6003

FEC ID number of contributing federal political committee. **C** C00053553

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
 06 / 24 / 2014

Transaction ID : 40702.C37320

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Outdoor Amusement Business Assoc. PAC

Mailing Address 1035 S Semoran Blvd Ste 1045A

City State Zip Code
Winter Park FL 32792-5512

FEC ID number of contributing federal political committee. **C** C00163212

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
 06 / 18 / 2014

Transaction ID : 40619.C37225

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Professional Landcare Network PAC

Mailing Address 950 Herndon Pkwy. Ste. 450

City State Zip Code
Herndon VA 20170

FEC ID number of contributing federal political committee. **C** C00420000

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
 06 / 18 / 2014

Transaction ID : 40619.C37223

Amount of Each Receipt this Period
1500.00

Receipt

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Safari Club International PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4800 W Gates Pass Rd
 City Tucson State AZ Zip Code 85745-9600
 FEC ID number of contributing federal political committee. **C C00122101**
 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
 06 / 05 / 2014
Transaction ID : 40606.C37210
 Amount of Each Receipt this Period
 Receipt 1000.00

B. Sanofi Pasteur Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address Discovery Dr
 City Swiftwater State PA Zip Code 18370-9100
 FEC ID number of contributing federal political committee. **C C00215236**
 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
 06 / 24 / 2014
Transaction ID : 40707.C37338
 Amount of Each Receipt this Period
 Receipt 2500.00

C. SkinPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 New York Ave NW Ste 800
 City Washington State DC Zip Code 20005-2125
 FEC ID number of contributing federal political committee. **C C00359539**
 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
 06 / 21 / 2014
Transaction ID : 40622.C37232
 Amount of Each Receipt this Period
 Receipt 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: (check only one)	PAGE 38 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
The Home Depot PAC

Mailing Address 1155 F St NW Ste 400

City Washington State DC Zip Code 20004-1346

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : 40616.C37221

Amount of Each Receipt this Period
1500.00

Receipt

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

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

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

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
 06 / 30 / 2014

Transaction ID : 40707.C37340

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Verizon Good Government PAC

Mailing Address 1300 I St NW FL 4

City Washington State DC Zip Code 20005-3314

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

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
 06 / 24 / 2014

Transaction ID : 40709.C37351

Amount of Each Receipt this Period
1000.00

Receipt

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 39 OF 55
	<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)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Wal-Mart Stores, Inc. PAC

Mailing Address 702 SW 8th St

City Bentonville State AR Zip Code 72716-6209

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

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
 06 / 30 / 2014

Transaction ID : 40707.C37342

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Zenca Inc. PAC

Mailing Address 1800 Concord Pike

City Wilmington State DE Zip Code 19805-5437

FEC ID number of contributing federal political committee. **C** C00279455

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
 06 / 30 / 2014

Transaction ID : 40707.C37344

Amount of Each Receipt this Period
1000.00

Receipt

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).....

2500.00

53500.00

**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 40 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **986.28**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : 40702.C37333

Amount of Each Receipt this Period
2.61

Other Receipt

NOTE: BANK INTEREST

B. Full Name (Last, First, Middle Initial)
PNC Bank - Jacksonville

Mailing Address 3422 Sweet Air Rd

City Phoenix State MD Zip Code 21131-1826

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1082.61**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : 40702.C37334

Amount of Each Receipt this Period
96.33

Other Receipt

NOTE: BANK INTEREST

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).....

98.94

98.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Bankcard Center		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 1641.20
City Dallas	State TX	
Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 40702.E5615
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. Atlantic Pawn		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 10975 State St		Amount of Each Disbursement this Period 900.00
City Delmar	State DE	
Zip Code 19940-3541	Purpose of Disbursement Office Equipment	Transaction ID : 40714.E5630
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: OFFICE EQUIPMENT
State: District:		

Full Name (Last, First, Middle Initial) C. Exxon		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 283.50
City Irving	State TX	
Zip Code 75039-4202	Purpose of Disbursement Travel Expense	Transaction ID : 40714.E5632
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1641.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Marriott Hotels		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 10400 Fernwood Rd		Amount of Each Disbursement this Period -----,-----,----- -39.56
City Bethesda	State MD	
Zip Code 20817-1102	Purpose of Disbursement Refund	Transaction ID : 40714.E5634
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: REFUND
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period -----,-----,----- 211.90
City Boca Raton	State FL	
Zip Code 33496-2434	Purpose of Disbursement Office Supplies	Transaction ID : 40714.E5635
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 910 Louisiana St		Amount of Each Disbursement this Period -----,-----,----- 0.06
City Houston	State TX	
Zip Code 77002-4916	Purpose of Disbursement Travel Expense	Transaction ID : 40714.E5636
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TRAVEL EXPENSE
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Virgin Mobile		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 2185 N California Blvd		Amount of Each Disbursement this Period 5041.63
City Walnut Creek	State CA	
Zip Code 94596-3500		[MEMO ITEM] MEMO: TELEPHONE
Purpose of Disbursement Telephone	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. Walmart Stores, Inc.		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 6721 Chesapeake Center Dr		Amount of Each Disbursement this Period 75.40
City Glen Burnie	State MD	
Zip Code 21060-6572		[MEMO ITEM] MEMO: OFFICE SUPPLIES
Purpose of Disbursement Office Supplies	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) c. GOP Shoppe		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 899 Airport Park Rd Ste H		Amount of Each Disbursement this Period 5041.63
City Glen Burnie	State MD	
Zip Code 21061-2557		SIGNS
Purpose of Disbursement Signs	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:		

SUBTOTAL of Disbursements This Page (optional).....	5041.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Sheryl Jaros		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 708 Kentmorr Rd		Amount of Each Disbursement this Period 58.69
City Stevensville	State MD	
Zip Code 21666-3110	Purpose of Disbursement See Below	Transaction ID : 40702.E5610
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 58.69
City Washington	State DC	
Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : 40702.E5611
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) c. Post Haste Mailing		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 90 Russell St Ste 100		Amount of Each Disbursement this Period 403.27
City Annapolis	State MD	
Zip Code 21401-3651	Purpose of Disbursement Postage	Transaction ID : 40702.E5625
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	POSTAGE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	461.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Amy Shuster		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 1500.00
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40611.E5566
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Shuster		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 135 E Clement St		Amount of Each Disbursement this Period 4804.25
City Baltimore	State MD	
Zip Code 21230-4510	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40702.E5614
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. The M Group LLC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 4590.41
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement See Below	Transaction ID : 40617.E5599
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10894.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. The M Group LLC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 1625.00
City Alexandria	State VA	
Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40617.E5600
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period 512.44
City Washington	State DC	
Zip Code 20003-1826	Purpose of Disbursement Meeting Expense	Transaction ID : 40617.E5601
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 19.47
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expense	Transaction ID : 40617.E5602
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: MEETING EXPENSE
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Capital Yacht Charters		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1300 Maine Ave SW		Amount of Each Disbursement this Period 2000.00
City Washington	State DC	
Zip Code 20024-2420	Purpose of Disbursement Event Facility Rental/Catering	Transaction ID : 40617.E5603
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT FACILITY RENTAL/CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. Party Palace Rentals, LLC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1615 Robin Cir Ste B		Amount of Each Disbursement this Period 433.50
City Forest Hill	State MD	
Zip Code 21050-3058	Purpose of Disbursement Event Equipment Rental	Transaction ID : 40617.E5604
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: EVENT EQUIPMENT RENTAL
State: District:		

Full Name (Last, First, Middle Initial) c. Upstream Communications LP		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 841.25
City Austin	State TX	
Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	Transaction ID : 40707.E5628
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CC TRANSACTION FEES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	841.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. WCBM		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 1726 Reisterstown Rd Ste 117		Amount of Each Disbursement this Period 650.00
City Baltimore	State MD	
Zip Code 21208-2986	Purpose of Disbursement Advertising Expense	Transaction ID : 40702.E5612
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ADVERTISING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. Chevy Weiss		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 3105 Bonnie Rd		Amount of Each Disbursement this Period 1637.80
City Baltimore	State MD	
Zip Code 21208-5602	Purpose of Disbursement See Below	Transaction ID : 40702.E5613
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. Chevy Weiss		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 3105 Bonnie Rd		Amount of Each Disbursement this Period 1500.00
City Baltimore	State MD	
Zip Code 21208-5602	Purpose of Disbursement Campaign Strategy Consulting	Transaction ID : 40707.E5626
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: CAMPAIGN STRATEGY CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2287.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 55			
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Amigo		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 1912B Flatbush Ave		Amount of Each Disbursement this Period 137.80
City Brooklyn	State NY	
Zip Code 11210-4801	Purpose of Disbursement TELEPHONE	Transaction ID : 40707.E5627
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

Full Name (Last, First, Middle Initial) B. Wired for Victory		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 1000.00
City Annapolis	State MD	
Zip Code 21404-2025	Purpose of Disbursement Media Consulting	Transaction ID : 40620.E5609
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MEDIA CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) c. Elizabeth Young		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 500.00
City Phoenix	State MD	
Zip Code 21131-2109	Purpose of Disbursement Financial Consulting	Transaction ID : 40616.E5593
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FINANCIAL CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	22668.50

**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 50 OF 55
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Rick W. Allen for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 338		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5620
City Augusta	State GA	
Zip Code 30903-0338	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name RICHARD W ALLEN	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: GA District: 12	

Full Name (Last, First, Middle Initial) B. SW Carroll for Rothschild		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3318 Oakwood Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : 40617.E5596
City New Windsor	State MD	
Zip Code 21776-8212	Purpose of Disbursement CONTRIBUTION (STATE COMMITTEE)	Category/ Type
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Pedro for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 2854		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5624
City Redmond	State WA	
Zip Code 98073-2854	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name PEDRO CELIS	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: WA District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Citizens for Kevin B. Emmerich		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 863 Locust Point Rd		Amount of Each Disbursement this Period 3000.00 Transaction ID : 40617.E5594
City Elkton	State MD	
Zip Code 21921-7947	Purpose of Disbursement CONTRIBUTIN (STATE COMMITTEE)	Category/ Type
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Gorell for Congress		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 1305 Del Norte Rd Ste 105		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5618
City Camarillo	State CA	
Zip Code 93010-8367	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name JEFF GORELL	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: CA District: 26	

Full Name (Last, First, Middle Initial) c. Friends of Frank Guinta		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address PO Box 877		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40617.E5598
City Manchester	State NH	
Zip Code 03105-0877	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name FRANK GUINTA	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: NH District: 01	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Friends of Rick Impallaria		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 1605 Singer Rd		Amount of Each Disbursement this Period 2000.00 Transaction ID : 40617.E5595
City Joppa	State MD Zip Code 21085-1514	
Purpose of Disbursement CONTRIBUTION (STATE COMMITTEE)		Category/ Type
Candidate Name		
Office Sought: <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Families for James Lankford		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address PO Box 1639		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40620.E5607
City Bethany	State OK Zip Code 73008-1639	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name JAMES PAUL LANKFORD		
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: OH	District: 00	

Full Name (Last, First, Middle Initial) c. Friends of Dan Logue for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 984		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5616
City Willows	State CA Zip Code 95988-0984	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name DANIEL LOGUE		
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: CA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Tom MacArthur for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 225		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5623
City Colonia	State NJ	
Zip Code 07067-0225	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name THOMAS MACARTHUR	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: NJ District: 03	

Full Name (Last, First, Middle Initial) B. Nestande for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 2150 River Plaza Dr Ste 150		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5619
City Sacramento	State CA	
Zip Code 95833-4131	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name BRIAN NESTANDE	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: CA District: 36	

Full Name (Last, First, Middle Initial) c. Doug Ose for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 9321 Silverbend Ln		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5617
City Elk Grove	State CA	
Zip Code 95624-3985	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name DOUG OSE	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: CA District: 04	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 55	
	<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)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Gary Palmer for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1919 Oxmoor Rd # 235		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40620.E5608
City Birmingham	State AL Zip Code 35209-3502	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name GARY PALMER		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input checked="" type="checkbox"/> Other (specify) Runoff 2014	
State: AL District: 06		

Full Name (Last, First, Middle Initial) B. Bobby Schilling for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 367 Avenue of the Cities Ste D		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40702.E5622
City East Moline	State IL Zip Code 61244-4053	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name ROBERT T SCHILLING		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: IL District: 17		

Full Name (Last, First, Middle Initial) c. Senger for Congress		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 4883		Amount of Each Disbursement this Period 2000.00 Transaction ID : 40702.E5621
City Naperville	State IL Zip Code 60567-4883	
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name DARLENE SENGER		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: IL District: 11		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

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

Full Name (Last, First, Middle Initial) A. Committee to Elect Kathleen Smero		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 8285 Berryfield Dr		Amount of Each Disbursement this Period 2706.50
City Nottingham	State MD	
Zip Code 21236-5553	Purpose of Disbursement CONTRIBUTION (STATE COMMITTEE)	Transaction ID : 40620.E5605
Candidate Name	Category/Type	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. VoteFrazier 2014		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 142 Bentley St		Amount of Each Disbursement this Period 500.00
City Taneytown	State MD	
Zip Code 21787-2158	Purpose of Disbursement CONTRIBUTION (STATE COMMITTEE)	Transaction ID : 40617.E5597
Candidate Name	Category/Type	
Office Sought: <input 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: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	3206.50
TOTAL This Period (last page this line number only).....	21706.50