

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

TREY GOWDY FOR CONGRESS

ADDRESS (number and street)

PO BOX 3324

Check if different than previously reported. (ACC)

SPARTANBURG

SC

29304

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00462523

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

SC

04

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 2018

through

M M /

D D /

Y Y Y Y 2018

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

Type or Print Name of Treasurer

HOUSE, MELISSA, , Mrs.,

Signature of Treasurer

HOUSE, MELISSA, , Mrs.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2018

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

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TREY GOWDY 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))....	1335.00	1958605.69
(b) Total Contribution Refunds (from Line 20(d))	1345.00	80653.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 10.00	1877952.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	25228.38	1441217.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	806.23
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25228.38	1440411.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1005385.44	
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 05/2016)

Write or Type Committee Name

TREY GOWDY 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).....	1000.00	575586.00
(ii) Unitemized	335.00	1225329.26
(iii) TOTAL of contributions from individuals	1335.00	1800915.26
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	157690.43
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1335.00	1958605.69
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	806.23
15. OTHER RECEIPTS (Dividends, Interest, etc.)	1644.28	182026.87
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	2979.28	2141438.79

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 26

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25228.38	1441217.67
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	1345.00	61153.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	19500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1345.00	80653.00
21. OTHER DISBURSEMENTS	10800.00	461390.55
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	37373.38	1983261.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1039779.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2979.28
25. SUBTOTAL (add Line 23 and Line 24).....	1042758.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37373.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1005385.44

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

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

FOR LINE NUMBER: PAGE 5 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENTVENA, LAWRENCE, , ,
 Mailing Address 14804 STIRRUP LANE
 City WELLINGTON State FL Zip Code 33414
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF-EMPLOYED Occupation HEALTHCARE IT
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2018
Transaction ID : SA11AI.121528
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Rutter, Dawson, , ,
 Mailing Address 250 everett st
 City Allston State MA Zip Code 02134
 FEC ID number of contributing federal political committee. C
 Name of Employer Commonwealth Worldwide Occupation CEO
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2018
Transaction ID : SA11AI.121633
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WAHL, JOHN, , ,
 Mailing Address 200 EAST 15TH ST.
 APT. 16G
 City NEWYORK State NY Zip Code 10003
 FEC ID number of contributing federal political committee. C
 Name of Employer PRESSED JUICERY Occupation VP OF SALES
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 04 / 2018
Transaction ID : SA11AI.121521
 Amount of Each Receipt this Period
 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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: PAGE 6 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDONATION 5 ACCOUNT

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
171457.61

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2018

Transaction ID : SA15.121539

Amount of Each Receipt this Period
489.60

Memo Item
LIST RENTAL INCOME

B. Full Name (Last, First, Middle Initial)
EDONATION 5 ACCOUNT

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
172603.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2018

Transaction ID : SA15.121540

Amount of Each Receipt this Period
1145.68

Memo Item
LIST RENTAL INCOME

C. Full Name (Last, First, Middle Initial)
EDONATION 5 ACCOUNT

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
172610.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2018

Transaction ID : SA15.121541

Amount of Each Receipt this Period
6.75

Memo Item
LIST RENTAL INCOME

SUBTOTAL of Receipts This Page (optional)..... ▶ 1642.03

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDONATION 5 ACCOUNT

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
172612.29

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2018

Transaction ID : SA15.121542

Amount of Each Receipt this Period
2.25

Memo Item
LIST RENTAL INCOME

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2.25
TOTAL This Period (last page this line number only).....▶	1644.28

**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 8 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement SALARY PROCESSING FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 44.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121553 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 77.59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121554 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement PAYROLL PROCESSING FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 44.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121567 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	166.09
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 9 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 77.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.121568 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement PAYROLL PROCESSING FEE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 40.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.121578 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ACCUCHEX		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2018
Mailing Address 605 19TH AVENUE NORTH		FEC Identification Number C
City MYRTLE BEACH	State SC	Zip Code 29577
Purpose of Disbursement TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 77.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.121579 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	195.50
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 10 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018	
Mailing Address 4000 E. SKY HARBOR BLVD.			FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85034	Amount of Each Disbursement this Period 254.90	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : SB17.121548	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2018	
Mailing Address 4000 E. SKY HARBOR BLVD.			FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85034	Amount of Each Disbursement this Period 282.90	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : SB17.121570	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2018	
Mailing Address 10202 PERINS ROWE SUITE 2006			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Disbursement this Period 30.50	
Purpose of Disbursement CREDIT CARD PROCESSING		Category/ Type 001	Transaction ID : SB17.121538	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	568.30
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 11 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		M M / D D / Y Y Y Y 07 / 02 / 2018
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 276.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018	Transaction ID : SB17.121581
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY		Date of Disbursement
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		M M / D D / Y Y Y Y 07 / 23 / 2018
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 149.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018	Transaction ID : SB17.121550
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		M M / D D / Y Y Y Y 07 / 30 / 2018
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement PHONE LINE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 43.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018	Transaction ID : SB17.121551
State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	469.39
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 12 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	001	
Candidate Name		Amount of Each Disbursement this Period 278.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121597
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	001	
Candidate Name		Amount of Each Disbursement this Period 149.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121564
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	001	
Candidate Name		Amount of Each Disbursement this Period 457.08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121604
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	884.72
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 13 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement PHONE LINE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 43.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121565
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement CELL PHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 154.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121574
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2018
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30342
Purpose of Disbursement PHONE LINE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 43.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121576
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	242.06
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 14 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY (DATA COVERAGE)		Date of Disbursement
Mailing Address POST OFFICE BOX 537104		M M / D D / Y Y Y Y 07 / 18 / 2018
City ATLANTA	State GA	Zip Code 30353
Purpose of Disbursement DATA COVERAGE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 33.24
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121545
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY (DATA COVERAGE)		Date of Disbursement
Mailing Address POST OFFICE BOX 537104		M M / D D / Y Y Y Y 08 / 20 / 2018
City ATLANTA	State GA	Zip Code 30353
Purpose of Disbursement DATA COVERAGE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 33.24
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121562
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY (DATA COVERAGE)		Date of Disbursement
Mailing Address POST OFFICE BOX 537104		M M / D D / Y Y Y Y 09 / 18 / 2018
City ATLANTA	State GA	Zip Code 30353
Purpose of Disbursement DATA COVERAGE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 33.24
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121572
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	99.72
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 15 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2018		
Mailing Address 117 N. ST. ASAPH ST			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 375.00		
Purpose of Disbursement CONTRIBUTION REFUND FEE		Category/ Type 010	Transaction ID : SB17.121622		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2018		
Mailing Address 117 N. ST. ASAPH ST			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 228.12		
Purpose of Disbursement CREDIT CARD PROCESSING REFUND FEE		Category/ Type 001	Transaction ID : SB17.121571		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018		
Mailing Address 300 FIRST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 409.09		
Purpose of Disbursement EVENT FOOD		Category/ Type 001	Transaction ID : SB17.121582		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1012.21
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 16 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018
Mailing Address 300 FIRST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT FOOD		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1473.25
State: District:		Transaction ID : SB17.121592 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2018
Mailing Address 300 FIRST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT FOOD		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 3574.23
State: District:		Transaction ID : SB17.121601 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. GOGOAIR		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018
Mailing Address 111 NORTH CANAL STREET		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement INTERNET		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 59.95
State: District:		Transaction ID : SB17.121549 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5107.43
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 17 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOGOAIR		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2018
Mailing Address 111 NORTH CANAL STREET		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement INTERNET	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 59.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121563
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GOGOAIR		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2018
Mailing Address 111 NORTH CANAL STREET		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement INTERNET	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 59.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121573
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GOWDY, TREY, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2018
Mailing Address PO BOX 3324		FEC Identification Number C H0SC04257
City SPARTANBURG	State SC	Zip Code 29304
Purpose of Disbursement MILEAGE AND MEALS	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 205.03
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121603
State: SC District: 04	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	324.93
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 18 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOWDY, TREY, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2018	
Mailing Address PO BOX 3324			FEC Identification Number C H0SC04257	
City SPARTANBURG	State SC	Zip Code 29304	Amount of Each Disbursement this Period 497.60	
Purpose of Disbursement MILEAGE AND MEALS		Category/ Type 002	Transaction ID : SB17.121605	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC	District: 04			

Full Name (Last, First, Middle Initial) B. GRAND BOHEMIAN HOTEL MOUNTAIN BROOK			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2018	
Mailing Address 2655 LANE PARK ROAD			FEC Identification Number C	
City BIRMINGHAM	State AL	Zip Code 35223	Amount of Each Disbursement this Period 307.71	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : SB17.121560	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) C. HOUSE, MELISSA, , Mrs.,			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 1500 BARBERRY LANE			FEC Identification Number C	
City SPARTANBURG	State SC	Zip Code 29302	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type 001	Transaction ID : SB17.121580	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2805.31
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 19 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOUSE, MELISSA, , Mrs.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2018		
Mailing Address 1500 BARBERRY LANE			FEC Identification Number C		
City SPARTANBURG	State SC	Zip Code 29302	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type 001	Transaction ID : SB17.121598		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HOUSE, MELISSA, , Mrs.,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018		
Mailing Address 1500 BARBERRY LANE			FEC Identification Number C		
City SPARTANBURG	State SC	Zip Code 29302	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type 001	Transaction ID : SB17.121614		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. HUCKABY, DAVIS AND LISKER			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018		
Mailing Address 228 SOUTH WASHINGTON STREET SUITE 115			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 2208.40		
Purpose of Disbursement FEC COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.121615		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6208.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

A. SPECIAL SERVICES CORPORATIONS

Full Name (Last, First, Middle Initial)
Mailing Address 54 WATSON AVIATION ROAD

City GREENVILLE State SC Zip Code 29607

Purpose of Disbursement TRAVEL Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 4135.00

Transaction ID : SB17.121606

Memo Item

B. U-STOR

Full Name (Last, First, Middle Initial)
Mailing Address 1016 SOUTH PINE STREET

City SPARTANBURG State SC Zip Code 29302

Purpose of Disbursement STORAGE UNIT Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 53.00

Transaction ID : SB17.121543

Memo Item

C. U-STOR

Full Name (Last, First, Middle Initial)
Mailing Address 1016 SOUTH PINE STREET

City SPARTANBURG State SC Zip Code 29302

Purpose of Disbursement STORAGE UNIT Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 53.00

Transaction ID : SB17.121557

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4241.00

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 21 OF 26			
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U-STOR		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018
Mailing Address 1016 SOUTH PINE STREET		FEC Identification Number C
City SPARTANBURG	State SC	Zip Code 29302
Purpose of Disbursement STORAGE UNIT	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 53.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121569
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. VENABLE LLP		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018
Mailing Address 600 MASSACHUSETTS AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement LEGAL CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1302.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121616
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WILLIS, MARY-LANGSTON, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2018
Mailing Address 816 N. OAKLAND ST. #304		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22203
Purpose of Disbursement SALARY	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 425.91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.121552
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1780.91
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WILLIS, MARY-LANGSTON, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2018	
Mailing Address 816 N. OAKLAND ST. #304			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22203	Amount of Each Disbursement this Period 425.90	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.121566	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WILLIS, MARY-LANGSTON, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2018	
Mailing Address 816 N. OAKLAND ST. #304			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22203	Amount of Each Disbursement this Period 425.90	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.121577	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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).....▶	851.80
TOTAL This Period (last page this line number only).....▶	24957.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENTVENA, LAWRENCE, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2018		
Mailing Address 14804 STIRRUP LANE			FEC Identification Number C		
City WELLINGTON	State FL	Zip Code 33414	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : SB20A.121627		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Rutter, Dawson, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018		
Mailing Address 250 everett st			FEC Identification Number C		
City Allston	State MA	Zip Code 02134	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : SB20A.121640		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. WAHL, JOHN, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2018		
Mailing Address 200 EAST 15TH ST. APT. 16G			FEC Identification Number C		
City NEWYORK	State NY	Zip Code 10003	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement REFUND		Category/ Type 010	Transaction ID : SB20A.121589		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAROL FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018	
Mailing Address 1316 12TH STREET			FEC Identification Number C C00653220	
City HUNTINGTON	State WV	Zip Code 25701	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.121593	
Candidate Name MILLER, CAROL DEVINE, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: WV District: 03				

Full Name (Last, First, Middle Initial) B. CAROLINA PREGNANCY CENTER			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2018	
Mailing Address 103 METRO DRIVE			FEC Identification Number C	
City SPARTANBURG	State SC	Zip Code 29303	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement DONATION		Category/ Type 012	Transaction ID : SB21.121602	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. KATIE ARRINGTON FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018	
Mailing Address PO BOX 80177			FEC Identification Number C C00653204	
City CHARLESTON	State SC	Zip Code 29416	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.121607	
Candidate Name ARRINGTON, KATHERINE ELIZABETH, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 01				

SUBTOTAL of Disbursements This Page (optional).....▶	3300.00
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 25 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KRISTI FOR GOVERNOR		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2018
Mailing Address PO BOX 15239 C/O RED RIVER CO.		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.121611
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UPSTATE SC LAW ENFORCEMENT MEMORIAL FUND		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2018
Mailing Address 102 S. MAIN STREET		FEC Identification Number C
City GREER	State SC	Zip Code 29650
Purpose of Disbursement DONATION	Category/ Type 012	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.121590
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WALKER 4 NC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018
Mailing Address PO BOX 99247		FEC Identification Number C C00543231
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement CONTRIBUTION	Category/ Type 011	
Candidate Name WALKER, BRADLEY MARK MR., , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB21.121583
State: NC District: 06	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
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 26 OF 26	
	<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)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WILKINS FOR SOLICITOR			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2018	
Mailing Address 707 CRESCENT AVE.			FEC Identification Number C	
City GREENVILLE	State SC	Zip Code 29601	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.121599	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WILLIAM TIMMONS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2018	
Mailing Address PO BOX 3416			FEC Identification Number C C00668491	
City GREENVILLE	State SC	Zip Code 29602	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.121618	
Candidate Name TIMMONS, WILLIAM R. IV, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SC District: 04				

Full Name (Last, First, Middle Initial) C. WILSON FOR ATTORNEY GENERAL			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2018	
Mailing Address PO BOX 1453			FEC Identification Number C	
City COLUMBIA	State SC	Zip Code 29202	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.121623	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	10800.00