

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

10

/ D D

01

/ Y Y Y Y

2013

through

M M

12

/ D D

31

/ Y Y Y Y

2013

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

01

/ D D

31

/ Y Y Y Y

2014

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))....	110073.45	668325.97
(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)).....	110073.45	667325.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	48517.86	290905.14
(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)).....	48517.86	286669.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	582242.29	
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).....	61550.00	345447.78
(ii) Unitemized.....	10509.00	73172.22
(iii) TOTAL of contributions from individuals ▶	72059.00	418620.00
(b) Political Party Committees.....	999.00	999.00
(c) Other Political Committees (such as PACs).....	37015.45	248706.97
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	110073.45	668325.97
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.).....	215.66	576.41
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	110289.11	673138.38

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48517.86	290905.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	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	19500.00	23500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	68017.86	315405.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	539971.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	110289.11
25. SUBTOTAL (add Line 23 and Line 24).....	650260.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68017.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	582242.29

**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 90
(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)
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

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2013

Transaction ID : 31009.C36244

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 5515 Foxfire Ln

City Lohman State MO Zip Code 65053-9665

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

Name of Employer Information Requested Occupation Information Requested
 Mid-Missouri Anesthesiology Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : 31007.C36219

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Advanced Anesthesiology Services LLC

Mailing Address 100 Trich Dr.

City Washington State PA Zip Code 15301

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

Name of Employer Information Requested Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : 40106.C36416

Amount of Each Receipt this Period
 Receipt 500.00

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

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

2000.00

**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 90
	<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)
Bryan Matusic

Mailing Address 104 Saddle Ridge Dr

City State Zip Code
Oakdale PA 15071-3726

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

Name of Employer Occupation
Gmr, Inc. Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36423

Amount of Each Receipt this Period
500.00

Memo
[MEMO ITEM]
Partnership->Advanced Anesthesiology Services LLC PARTNERSH

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

Mailing Address 938 Hanover Ave

City State Zip Code
Norfolk VA 23508-1227

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

Name of Employer Occupation
Atlantic Anesthesia 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
10 / 18 / 2013

Transaction ID : 31021.C36263

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 6415 Murray Hill Rd

City State Zip Code
Baltimore MD 21212

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

Name of Employer Occupation
Information Requested 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
11 / 06 / 2013

Transaction ID : 31111.C36301

Amount of Each Receipt this Period
2000.00

Receipt

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

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

2500.00

**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 90
	<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)
John Azzariti

Mailing Address 8 Beechwood Dr

City State Zip Code
Saddle River NJ 07458-3313

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

Name of Employer Occupation
Bergen Anesthesia Associates 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
12 31 / 2013

Transaction ID : 40106.C36493

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 158201

City State Zip Code
Nashville TN 37215-8201

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

Name of Employer Occupation
Vanderbilt University Medical Physician

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
10 05 / 2013

Transaction ID : 31007.C36226

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 92 Hollymead Dr

City State Zip Code
Spring TX 77381-5121

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

Name of Employer Occupation
NW Anesthesiology 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 Y Y
12 20 / 2013

Transaction ID : 40106.C36415

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 90
	<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)
Blue Heron Medical Group, LLC

Mailing Address 305 10th St
Ste. 101

City Pocomoke City State MD Zip Code 21851

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36347

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 31505 Orchard Ter

City Westover State MD Zip Code 21871-3631

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : 31118.C36348

Amount of Each Receipt this Period
 Memo 250.00

[MEMO ITEM]
Partnership->Blue Heron Medical Group, LLC PARTNERSHIP

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

Mailing Address 1636 Bordeaux St

City New Orleans State LA Zip Code 70115-4843

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

Name of Employer Occupation
Ochsner Clinic Foundation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36463

Amount of Each Receipt this Period
 Receipt 250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 90
	<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)
Arthur Boudreaux

Mailing Address 4493 Preserve Dr

City Hoover State AL Zip Code 35226-4141

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

Name of Employer UABHSF 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
 12 / 31 / 2013

Transaction ID : 40106.C36486

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 2267 Cedardale Ave

City Baton Rouge State LA Zip Code 70808-2812

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

Name of Employer Spine Diagnostic 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
 11 / 20 / 2013

Transaction ID : 31125.C36356

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address PO Box 751

City Ocean City State MD Zip Code 21843-0751

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

Name of Employer BJs on the Water Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36288

Amount of Each Receipt this Period
 Receipt 200.00

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 10 OF 90
	<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)
Irene Carey

Mailing Address PO Box B

City State Zip Code
Fruitland MD 21826-0030

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

Name of Employer Occupation
Carey Distribution, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : 31118.C36342

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 8385 Valley Tarn

City State Zip Code
Atlanta GA 30350-3430

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

Name of Employer Occupation
Physician Specialists 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
12 / 31 / 2013

Transaction ID : 40106.C36475

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 404 N Hawthorne Rd

City State Zip Code
Duluth MN 55812-1540

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

Name of Employer Occupation
St Lukes Hosp Of Duluth 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
12 / 31 / 2013

Transaction ID : 40106.C36454

Amount of Each Receipt this Period
250.00

Receipt

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 90
	<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)
Thomas Collier

Mailing Address 5306 Johnsontown Rd

City State Zip Code
Chestertown MD 21620-4959

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

Name of Employer Occupation
Self Employed Investment Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : 31125.C36353

Amount of Each Receipt this Period
1600.00

Receipt

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

Mailing Address 5306 Johnsontown Rd

City State Zip Code
Chestertown MD 21620-4959

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

Name of Employer Occupation
Self Employed Investment Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 18 / 2013

Transaction ID : 31125.C36354

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 48 Fox Hedge Rd

City State Zip Code
Saddle River NJ 07458-2706

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

Name of Employer Occupation
Napa 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
12 / 31 / 2013

Transaction ID : 40106.C36451

Amount of Each Receipt this Period
250.00

Receipt

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

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

2850.00

**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 90
	<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)
Charles Cote

Mailing Address 68 Post Island Rd

City Quincy State MA Zip Code 02169-2614

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

Name of Employer Massachusetts General Hospital 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 Y
 12 / 31 / 2013

Transaction ID : 40106.C36488

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 500 Woodbrook Dr

City High Point State NC Zip Code 27262

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 Y
 12 / 05 / 2013

Transaction ID : 31210.C36370

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 4520 Alpine Rose Bend

City Ellicott City State MD Zip Code 21042

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
 11 / 06 / 2013

Transaction ID : 31111.C36305

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 13 OF 90
	<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)
Antonio Darosa

Mailing Address 5629 Columbia Rd., Apt. 202

City Columbia State MD Zip Code 21044

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

Name of Employer Fortis Institute Occupation Campus President

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
 11 / 06 / 2013

Transaction ID : 31111.C36303

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 8289 Elko Dr

City Ellicott City State MD Zip Code 21043-7223

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 Y Y
 12 / 31 / 2013

Transaction ID : 40114.C36533

Amount of Each Receipt this Period
 Receipt 500.00

C. Full Name (Last, First, Middle Initial)
Kraig De Lanzac

Mailing Address 12 Tara Pl

City Metairie State LA Zip Code 70002-1559

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
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2013

Transaction ID : 31125.C36360

Amount of Each Receipt this Period
 Receipt 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 90
	<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)
Greg Dragon

Mailing Address 18 Crestview Dr

City State Zip Code
Ocean View NJ 08230-1701

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

Name of Employer Occupation
Cape Anesthesia & Pain 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 Y Y
12 31 / 2013

Transaction ID : 40106.C36492

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 5856 N Echo Canyon Ln

City State Zip Code
Phoenix AZ 85018-1286

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

Name of Employer Occupation
Valley Anesthesiology 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 Y Y
12 20 / 2013

Transaction ID : 40106.C36448

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address 519 N Pinehurst Ave

City State Zip Code
Salisbury MD 21801-6111

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

Name of Employer Occupation
Peninsula Urology Physician

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
11 04 / 2013

Transaction ID : 31104.C36282

Amount of Each Receipt this Period
500.00

Receipt

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

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

875.00

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

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

FOR LINE NUMBER: PAGE 15 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Michael David Epstein
 Mailing Address 5410 Edson Ln Ste 300
 City State Zip Code
 Rockville MD 20852-3155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Willow Asset Management LLC Executive
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 05 2013
Transaction ID : 31210.C36378
 Amount of Each Receipt this Period
 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
William Esham
 Mailing Address PO Box 1244
 City State Zip Code
 Berlin MD 21811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ayers Jenkins Goud Attorney
 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
 11 14 2013
Transaction ID : 31118.C36331
 Amount of Each Receipt this Period
 500.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Monique Espinosa
 Mailing Address 90 Edgewater Dr Apt 1211
 City State Zip Code
 Coral Gables FL 33133-6920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 University Of Miami 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 Y
 10 14 2013
Transaction ID : 31017.C36251
 Amount of Each Receipt this Period
 250.00
 Receipt

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 90
	<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)
Charles Evans, Jr.

Mailing Address 106 Hayward St

City Cambridge State MD Zip Code 21613-1921

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

Name of Employer Evans Land LLC Occupation 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 Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36297

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 7904 Ellenham Ave

City Towson State MD Zip Code 21204-3522

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

Name of Employer Johns Hopkins Gbmc 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 Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36500

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 4107 Woodbriar Ct

City Sugar Land State TX Zip Code 77479-2827

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : 40106.C36400

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 17 OF 90
	<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)
Thomas Fisher

Mailing Address 27823 Pemberton Dr

City Salisbury State MD Zip Code 21801-2420

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 **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36333

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 2200 Broening Hwy Ste 160

City Baltimore State MD Zip Code 21224-6614

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
 11 / 06 / 2013

Transaction ID : 31111.C36304

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 38 Hedgerow Dr

City Falmouth State ME Zip Code 04105-1407

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

Name of Employer Spectrum Medical Gp. 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 Y
 12 / 31 / 2013

Transaction ID : 40106.C36455

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 90

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Folk
 Mailing Address 431 Orinoco Dr
 City State Zip Code
 High Point NC 27265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cornerstone Healthcare 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
 12 / 05 / 2013
Transaction ID : 31210.C36367
 Amount of Each Receipt this Period
 250.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Marc Gattiker
 Mailing Address 5939 S Moline Way
 City State Zip Code
 Englewood CO 80111-5836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 South Denver Anesthesiology 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
 12 / 20 / 2013
Transaction ID : 40106.C36417
 Amount of Each Receipt this Period
 400.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Alana Gillespie
 Mailing Address 1514 December Dr
 Apt 402
 City State Zip Code
 Silver Spring MD 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested 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 Y
 11 / 06 / 2013
Transaction ID : 31111.C36310
 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: PAGE 19 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Beverly Glass

Mailing Address 1410 S Salisbury Blvd

City Salisbury State MD Zip Code 21801-7131

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

Name of Employer Self Employed Occupation Periodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36300

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 9001 Fernwood Rd

City Bethesda State MD Zip Code 20817-3017

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

Name of Employer Gordon Contractors Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2013

Transaction ID : 31028.C36272

Amount of Each Receipt this Period
2600.00

Receipt

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

Mailing Address 23 Rolling Ridge Rd

City White Plains State NY Zip Code 10605-4526

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

Name of Employer Nyu School Of Medicine Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36491

Amount of Each Receipt this Period
1000.00

Receipt

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

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

3800.00

**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 90
	<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)
Andrew Grimes

Mailing Address 6402 Dry Bend Cv

City Austin State TX Zip Code 78731-3925

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

Name of Employer Capitol Anesthesiology Assn 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 Y Y
 12 / 07 / 2013

Transaction ID : 31210.C36386

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 10552 Sussex Rd

City Ocean City State MD Zip Code 21842-9148

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36334

Amount of Each Receipt this Period
 Receipt 125.00

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

Mailing Address 19 Nantucket Dr

City Bloomfield Hills State MI Zip Code 48304-3342

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

Name of Employer Anesthesia Services, Pc 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 Y Y
 12 / 31 / 2013

Transaction ID : 40114.C36532

Amount of Each Receipt this Period
 Receipt 250.00

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

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

625.00

**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 90
	<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)
Kim Hammond

Mailing Address 6314 Falls Rd

City Baltimore State MD Zip Code 21209

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

Name of Employer Falls Road Animal Hospital Occupation Veterinarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36312

Amount of Each Receipt this Period
 Receipt 2000.00

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

Mailing Address 1522 Teal Dr

City Ocean City State MD Zip Code 21842-5555

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

Name of Employer Harrison Group Occupation Hotel Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36294

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 5939 S Point Rd

City Berlin State MD Zip Code 21811-2628

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

Name of Employer Self Employed Occupation Hotelier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36344

Amount of Each Receipt this Period
 Receipt 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 90
	<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 Hawney

Mailing Address 5611 Marcia Ave

City State Zip Code
New Orleans LA 70124-1005

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

Name of Employer Occupation
Tulane University Hospital 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
12 / 05 / 2013

Transaction ID : 31210.C36381

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 5417 Royal Mile Blvd

City State Zip Code
Salisbury MD 21801-2322

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

Name of Employer Occupation
Delmarva Heart, LLC Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2013

Transaction ID : 31104.C36285

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address 1028 Windchime Way

City State Zip Code
Pensacola FL 32503-2548

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

Name of Employer Occupation
Panhandle Medical Services Anesthesiologist

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
12 / 07 / 2013

Transaction ID : 31210.C36383

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1625.00

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

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

FOR LINE NUMBER: PAGE 23 OF 90
(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)
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
 _____ 1650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : 40106.C36478

Amount of Each Receipt this Period
 _____ 650.00

Receipt

B. 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
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : 40106.C36477

Amount of Each Receipt this Period
 _____ 1350.00

Receipt

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

Mailing Address 232 Narrows Dr

City Birmingham State AL Zip Code 35242-8651

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

Name of Employer AAPC, Inc. 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 Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36487

Amount of Each Receipt this Period
 _____ 250.00

Receipt

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

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

_____ 2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 90
	<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)
Glen Holley

Mailing Address 2104 Peninsula Dr

City State Zip Code
Flower Mound TX 75022-5479

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

Name of Employer Occupation
Pinnacle Anesthesiology 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
 12 31 2013

Transaction ID : 40106.C36460

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

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

Mailing Address 217 Marlboro Rd

City State Zip Code
Sudbury MA 01776-1349

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

Name of Employer Occupation
St. Elizabeths Medical Center 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
 12 31 2013

Transaction ID : 40106.C36471

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

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

Mailing Address 1524 Woodland Rd

City State Zip Code
Salisbury MD 21801-6739

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 14 2013

Transaction ID : 31118.C36332

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

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

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

900.00

**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 90
	<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)
Jonathan Jaffe

Mailing Address 311 Hilly Creek Ct

City Lewisville State NC Zip Code 27023-9806

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

Name of Employer Wake Forest Baptist Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : 31017.C36253

Amount of Each Receipt this Period
 Receipt 100.00

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

Mailing Address 311 Hilly Creek Ct

City Lewisville State NC Zip Code 27023-9806

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

Name of Employer Wake Forest Baptist Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2013

Transaction ID : 31216.C36390

Amount of Each Receipt this Period
 Receipt 100.00

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

Mailing Address 311 Hilly Creek Ct

City Lewisville State NC Zip Code 27023-9806

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

Name of Employer Wake Forest Baptist Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40113.C36518

Amount of Each Receipt this Period
 Receipt 100.00

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

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

300.00

**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 90
	<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)
Charles Jenkins

Mailing Address **PO Box 572**

City **Ocean City** State **MD** Zip Code **21843-0572**

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

Name of Employer **Bayshore Developments Corp.** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 14 / 2013

Transaction ID : 31118.C36330

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **225 Mill Harbor Dr**

City **Arnold** State **MD** Zip Code **21012-1033**

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

Name of Employer **Rifkin Weiner Livingston** Occupation **Attorney**

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
11 / 06 / 2013

Transaction ID : 31111.C36302

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **3667 Saint Lukes Rd**

City **Salisbury** State **MD** Zip Code **21804-1376**

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 **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 05 / 2013

Transaction ID : 31210.C36375

Amount of Each Receipt this Period
500.00

Receipt

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

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

1500.00

**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 90
	<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)
Peter Kane

Mailing Address 4462 Lincklaen Rd

City Cazenovia State NY Zip Code 13035-9752

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : 31104.C36275

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

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

Mailing Address 6047 Brokenhurst Rd

City Indianapolis State IN Zip Code 46220-4987

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

Name of Employer luaa 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 Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36458

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

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

Mailing Address 5500 Prytania St Apt 435

City New Orleans State LA Zip Code 70115-4237

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

Name of Employer Ochsner Medical Center Occupation 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 Y Y
 11 / 11 / 2013

Transaction ID : 31118.C36352

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 28 OF 90
	<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)
James Kowatch

Mailing Address 841 E Fort Ave # 239

City Baltimore State MD Zip Code 21230-5117

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

Name of Employer Capital Education Consultants Occupation Owner

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
 10 / 28 / 2013

Transaction ID : 31104.C36283

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 2248 Shawnee Dr SE

City Grand Rapids State MI Zip Code 49506-5335

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

Name of Employer Anesthesia Practice Consultant 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 Y Y
 12 / 15 / 2013

Transaction ID : 31216.C36396

Amount of Each Receipt this Period
 Receipt 100.00

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

Mailing Address 6304 Crestview Dr

City Shawnee State KS Zip Code 66218-9173

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

Name of Employer MWA 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
 10 / 07 / 2013

Transaction ID : 31017.C36249

Amount of Each Receipt this Period
 Receipt 250.00

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 29 OF 90
	<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)
Michael Lasecki

Mailing Address 3398 Riviere Du Chien Loop N

City State Zip Code
Mobile AL 36693-5413

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

Name of Employer Occupation
Anesthesia Services P.c. Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36442

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address 24 Highfield Ct

City State Zip Code
Cockeysville MD 21030-3023

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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2013

Transaction ID : 31007.C36220

Amount of Each Receipt this Period
1100.00

Receipt

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

Mailing Address 24 Highfield Ct

City State Zip Code
Cockeysville MD 21030-3023

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2013

Transaction ID : 31028.C36265

Amount of Each Receipt this Period
900.00

Receipt

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

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

2125.00

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

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

FOR LINE NUMBER: PAGE 30 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

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

Mailing Address **PO Box 259**

City **Salisbury** State **MD** Zip Code **21803-0259**

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

Name of Employer **Long Badger Sheller and Smith** Occupation **Attorney**

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
11 / 14 / 2013

Transaction ID : 31118.C36345

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **171 Harr Trail Rd**

City **Blountville** State **TN** Zip Code **37617-3423**

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

Name of Employer **Bristol Anesthesia 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 Y
12 / 31 / 2013

Transaction ID : 40106.C36502

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address **4 Timber Ln**

City **Woodbridge** State **CT** Zip Code **06525-1835**

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

Name of Employer **Woodland Anesthesia Assoc.** 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 Y
12 / 20 / 2013

Transaction ID : 40106.C36445

Amount of Each Receipt this Period
250.00

Receipt

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

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

1500.00

**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 90
	<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)
Alan Marco

Mailing Address 569 Calumet Pl

City State Zip Code
Beavercreek OH 45434-6287

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

Name of Employer Occupation
Wright State Physicians Inc. 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
12 31 / 2013

Transaction ID : 40106.C36485

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 308 West St NW

City State Zip Code
Vienna VA 22180-4151

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

Name of Employer Occupation
Information Requested 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 Y Y
10 08 / 2013

Transaction ID : 31009.C36241

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 19 Gentry Dr

City State Zip Code
Palmyra PA 17078-3840

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

Name of Employer Occupation
Penn State University 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 Y Y
10 18 / 2013

Transaction ID : 31021.C36264

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 32 OF 90
	<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)
Veronica Massey

Mailing Address 11811 Shire Wycliffe Ct

City Tampa State FL Zip Code 33626-3330

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

Name of Employer Florida Gulf To Bay Anesth. Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36464

Amount of Each Receipt this Period
1200.00

Receipt

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

Mailing Address 53 Cannon Dr

City Berlin State MD Zip Code 21811

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
 11 / 06 / 2013

Transaction ID : 31111.C36311

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 9663 Santa Monica Blvd # 901

City Beverly Hills State CA Zip Code 90210-4303

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : 31125.C36357

Amount of Each Receipt this Period
250.00

Receipt

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 33 OF 90
	<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)
Joseph Miller

Mailing Address 1236 Sturbridge Ave

City High Point State NC Zip Code 27262

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

Name of Employer Regional Physicians Occupation 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 Y
 12 / 05 / 2013

Transaction ID : 31210.C36365

Amount of Each Receipt this Period
750.00

Receipt

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

Mailing Address 74 Cree Ter

City Rising Sun State MD Zip Code 21911-1314

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

Name of Employer Bhevins Heating & Cooling Occupation Sales

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
 12 / 20 / 2013

Transaction ID : 40106.C36437

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 5186

City High Point State NC Zip Code 27262

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
 12 / 05 / 2013

Transaction ID : 31210.C36364

Amount of Each Receipt this Period
250.00

Receipt

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 90
	<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)
Kevin Neff

Mailing Address 25870 Woodlore Rd

City State Zip Code
Franklin MI 48025-1258

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

Name of Employer Occupation
Anesthesia Associates Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 31 / 2013

Transaction ID : 40106.C36472

Amount of Each Receipt this Period
300.00

Receipt

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

Mailing Address 10527 Calvin Ln

City State Zip Code
Berlin MD 21811-3116

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

Name of Employer Occupation
BSC America Companies President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 14 / 2013

Transaction ID : 31118.C36349

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 912 White Marlin Way

City State Zip Code
Annapolis MD 21409-5753

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

Name of Employer Occupation
Anesthesia Company Llc 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
12 20 / 2013

Transaction ID : 40106.C36407

Amount of Each Receipt this Period
250.00

Receipt

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
	<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)
Theresa Northern

Mailing Address 2336 Dublin St

City State Zip Code
New Orleans LA 70118-2963

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

Name of Employer Occupation
Ochsner 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
12 / 05 / 2013

Transaction ID : 31210.C36380

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1836 S Shores Dr

City State Zip Code
Decatur IL 62521

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

Name of Employer Occupation
Anesthesiologists of Decatur 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
11 / 12 / 2013

Transaction ID : 31118.C36317

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 4039 Marlowe St

City State Zip Code
Houston TX 77005-1936

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

Name of Employer Occupation
Greater Houston Anesthesiology Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36410

Amount of Each Receipt this Period
200.00

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 36 OF 90
	<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)
Jeffrey Parks

Mailing Address 5160 La Canada Blvd

City La Canada Flt State CA Zip Code 91011-1714

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

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : 40106.C36408

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 7 Glenberry Ct

City Phoenix State MD Zip Code 21131-1413

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

Name of Employer Physicians Anesthesia Assoc Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36507

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 915 N Briarcliff Cir

City Maryville State TN Zip Code 37803-6465

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

Name of Employer Maryville Anesthesiologists Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : 31007.C36218

Amount of Each Receipt this Period
 Receipt 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 90
	<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)
Pinnacle Anesthesia Consultants, P.A.

Mailing Address 13601 Preston Rd. Ste. 1000W

City	State	Zip Code
Dallas	TX	75240

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : 31028.C36269

Amount of Each Receipt this Period
 Receipt 1500.00

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

Mailing Address 13601 Preston Rd. Ste. 1000W

City	State	Zip Code
Dallas	TX	75240

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

Name of Employer	Occupation

Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : 31028.C36274

Amount of Each Receipt this Period
 Memo 1500.00

[MEMO ITEM]
 Partnership->Pinnacle Anesthesia Consultants, P.A.
 PARTNERSH

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

Mailing Address 13320 Signal Tree Ln

City	State	Zip Code
Potomac	MD	20854-6053

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

Name of Employer	Occupation
MHAF	President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2013

Transaction ID : 31009.C36239

Amount of Each Receipt this Period
 Receipt 250.00

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

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

1750.00

**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 90
	<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)
George Purnell

Mailing Address 3409 Coastal Hwy

City State Zip Code
Ocean City MD 21842-7458

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

Name of Employer Occupation
Purnell Properties Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : 31118.C36343

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 13048 Rocky River Rd N

City State Zip Code
Jacksonville FL 32224-7590

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

Name of Employer Occupation
Florida Anesthesia Associates 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
12 / 17 / 2013

Transaction ID : 40106.C36480

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 7405 90th Street Ct E

City State Zip Code
Puyallup WA 98371-6579

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

Name of Employer Occupation
Rainier Anesthesia Associates 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
12 / 20 / 2013

Transaction ID : 40106.C36409

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 39 OF 90
	<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)
Jeremy Roberts

Mailing Address 4056 Scott B Dr

City Saint Clair State MI Zip Code 48079-3564

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

Name of Employer Anesthesia Services PC 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 Y Y
 12 / 31 / 2013

Transaction ID : 40114.C36531

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 1237 Pilgrim Ave

City Birmingham State MI Zip Code 48009-4804

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

Name of Employer Prizm Pain Specialists 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 Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36494

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 462 Chukker Vly

City Ellisville State MO Zip Code 63021-2043

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

Name of Employer Waai 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
 10 / 06 / 2013

Transaction ID : 31007.C36227

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 40 OF 90
	<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)
Richard Savio

Mailing Address 961 Lynch Dr

City State Zip Code
Arnold MD 21012-1501

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
11 / 12 / 2013

Transaction ID : 31118.C36324

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 92 Oak Grove Dr

City State Zip Code
Brewer ME 04412-1268

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

Name of Employer Occupation
Eastern Maine Medical Center Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36444

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 635 5th Ave

City State Zip Code
Albany GA 31701-1827

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

Name of Employer Occupation
Albany Anesthesia Associates Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36403

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 90
	<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)
Symcha Shpak

Mailing Address **PO Box 461**

City **Neavitt** State **MD** Zip Code **21652-0461**

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 12 / 2013

Transaction ID : 31118.C36327

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **1914 Summerwood Dr**

City **Farmington** State **UT** Zip Code **84025-4109**

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 **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : 31017.C36252

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **1805 Greencreek Dr**

City **San Jose** State **CA** Zip Code **95124-1121**

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 **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 14 / 2013

Transaction ID : 31118.C36346

Amount of Each Receipt this Period
250.00

Receipt

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 90
	<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. Jose Soberon		Date of Receipt M M / D D / Y Y Y Y Y 12 / 05 / 2013
Mailing Address 2909 Ridgeway Dr		Transaction ID : 31210.C36376
City State Zip Code Metairie LA 70002-5051	Amount of Each Receipt this Period Receipt 125.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ochsner Clinic Foundation Physician	Receipt 125.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125.00	

Full Name (Last, First, Middle Initial) B. Jose Soberon		Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013
Mailing Address 2909 Ridgeway Dr		Transaction ID : 31216.C36394
City State Zip Code Metairie LA 70002-5051	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Ochsner Clinic Foundation Physician	Receipt 625.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 625.00	

Full Name (Last, First, Middle Initial) C. Steven Soule		Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2013
Mailing Address 7152 Ridgecrest Ct		Transaction ID : 40106.C36430
City State Zip Code Ventura CA 93003-1433	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self Employed Anesthesiologist	Receipt 600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	1125.00
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 43 OF 90
	<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)
Rex Spaulding

Mailing Address 3104 W Calla Rd

City State Zip Code
Canfield OH 44406

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
 11 / 06 / 2013

Transaction ID : 31111.C36306

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 1130 Flora Ave

City State Zip Code
Coronado CA 92118-2830

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

Name of Employer Information Requested Occupation Information Requested
ASMG 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
 12 / 20 / 2013

Transaction ID : 40106.C36428

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address PO Box 804

City State Zip Code
Cambridge MD 21613-0804

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

Name of Employer Information Requested Occupation Information Requested
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36287

Amount of Each Receipt this Period
 Receipt 200.00

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 44 OF 90
	<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)
Stephen Starling

Mailing Address 2036 Magnolia Rdg

City Vestavia State AL Zip Code 35243-2018

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

Name of Employer Anesthesia Resources Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36504

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 76 1/2 Cedar Dr

City Great Neck State NY Zip Code 11021-2840

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

Name of Employer Nassau Anesthesia Associates Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : 40106.C36449

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 4358 Sunset Dr

City Tyaskin State MD Zip Code 21865-2011

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

Name of Employer Self Employed Occupation Pediatrician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36328

Amount of Each Receipt this Period
 Receipt 250.00

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

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

1000.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 45 OF 90

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

A. Full Name (Last, First, Middle Initial)
Damon Templeton

Mailing Address 3507 Lakestone Ct

City Augusta State GA Zip Code 30907-8979

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

Name of Employer Anesthesia Consultants Augusta 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 Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36489

Amount of Each Receipt this Period
 250.00

Receipt

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

Mailing Address 8390 Warwick Groves Ct

City Grand Blanc State MI Zip Code 48439-7425

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

Name of Employer Genesee Medical Anesthesia P.c 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
 10 / 12 / 2013

Transaction ID : 31017.C36250

Amount of Each Receipt this Period
 250.00

Receipt

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

Mailing Address 11435 Newport Bay Dr

City Berlin State MD Zip Code 21811-9641

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
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : 31111.C36296

Amount of Each Receipt this Period
 200.00

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 46 OF 90
	<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)
Phat Vu

Mailing Address 1313 Saint Albans Path

City Southlake State TX Zip Code 76092-9632

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

Name of Employer Pinnacle Partners In Medicine 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 Y Y
12 / 31 / 2013

Transaction ID : 40106.C36501

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 811 Wayside Ln

City Haddonfield State NJ Zip Code 08033-1047

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

Name of Employer South Jersey Anesthesia Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2013

Transaction ID : 31216.C36395

Amount of Each Receipt this Period
150.00

Receipt

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

Mailing Address 6845 Rancho Los Pavos Ln

City Granite Bay State CA Zip Code 95746-7349

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

Name of Employer Case Medical Group 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 Y Y
12 / 31 / 2013

Transaction ID : 40106.C36476

Amount of Each Receipt this Period
200.00

Receipt

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

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

850.00

**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 47 OF 90
	<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. Dennis Webster

Mailing Address 1402 Providence Rd

City Towson State MD Zip Code 21286-1520

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 **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36337

Amount of Each Receipt this Period
125.00

Receipt

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

Mailing Address PO Box 552

City Hebron State MD Zip Code 21830

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
 11 / 14 / 2013

Transaction ID : 31118.C36351

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 223 S Grand St Ste 401

City Monroe State LA Zip Code 71201-7300

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

Name of Employer Parish Anesthesia Occupation Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 23 / 2013

Transaction ID : 31125.C36359

Amount of Each Receipt this Period
1000.00

Receipt

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: (check only one)	PAGE 48 OF 90
	<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)
James Wickwire

Mailing Address 27 Talcott Notch Rd

City Avon State CT Zip Code 06001-2810

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

Name of Employer Hartford Anesthesiology Assoc. 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 Y Y
 12 / 20 / 2013

Transaction ID : 40106.C36413

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1203 Pemberton Dr

City Salisbury State MD Zip Code 21801-2403

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 **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : 31118.C36350

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 449 S Wrenn St

City High Point State NC Zip Code 27260-6642

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
 12 / 05 / 2013

Transaction ID : 31210.C36368

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 49 OF 90
	<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)
Ervin Yen

Mailing Address 1700 Elmhurst Ave

City Nichols Hills State OK Zip Code 73120-1012

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : 40106.C36483

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 13508 Gum Spring Dr

City Rockville State MD Zip Code 20850-3581

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

Name of Employer First Colonies Anesthesia 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
 10 / 08 / 2013

Transaction ID : 31009.C36240

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 1225 Turnbury Oak St

City Houston State TX Zip Code 77055-7016

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

Name of Employer Greater Houston Anesthesiology 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
 12 / 31 / 2013

Transaction ID : 40106.C36505

Amount of Each Receipt this Period
250.00

Receipt

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

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

1250.00

61550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 90
	<input type="checkbox"/> 11a 12 <input checked="" 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)
High Point Republican Party

Mailing Address 1236 Sturbridge Ave

City High Point State NC Zip Code 27262

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
999.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2013

Transaction ID : 31210.C36379

Amount of Each Receipt this Period
 999.00

Receipt

NOTE:PERMISSIBLE FUNDS

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).....

999.00

999.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 90
	<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)
ACSPA - Surgeons PAC

Mailing Address 1640 Wisconsin Ave NW

City Washington State DC Zip Code 20007-7715

FEC ID number of contributing federal political committee. **C C00382424**

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
 12 / 31 / 2013

Transaction ID : 40113.C36513

Amount of Each Receipt this Period
 3000.00

Receipt

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

Mailing Address 1625 Prince St Ste 225

City Alexandria State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C C00250399**

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
 12 / 20 / 2013

Transaction ID : 40106.C36441

Amount of Each Receipt this Period
 2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Alliant Techsystems, Inc. PAC

Mailing Address 1300 Wilson Blvd Ste 400

City Arlington State VA Zip Code 22209-2307

FEC ID number of contributing federal political committee. **C C00250209**

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
 10 / 28 / 2013

Transaction ID : 31104.C36278

Amount of Each Receipt this Period
 365.45

In-Kind
 Event Supplies

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

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

5865.45

**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 52 OF 90
	<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)
Alliant Techsystems, Inc. PAC

Mailing Address 1300 Wilson Blvd Ste 400

City State Zip Code
Arlington VA 22209-2307

FEC ID number of contributing federal political committee. **C C00250209**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1365.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 / 2013

Transaction ID : 40113.C36512

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

B. Full Name (Last, First, Middle Initial)
American Soc of Plastic Surgeons Inc PAC

Mailing Address 444 E Algonquin Rd

City State Zip Code
Arlington Heights IL 60005-4654

FEC ID number of contributing federal political committee. **C C00249342**

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
 12 31 / 2013

Transaction ID : 40113.C36514

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

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

Mailing Address 1101 Connecticut Ave NW Ste 900

City State Zip Code
Washington DC 20036-4346

FEC ID number of contributing federal political committee. **C C00213066**

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
 11 06 / 2013

Transaction ID : 31111.C36309

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

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 90
	<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)
Arch PAC

Mailing Address 1 Cityplace Dr

City Saint Louis State MO Zip Code 63141-7014

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2013

Transaction ID : 40113.C36516

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address 208 S Akard St Ste 3521

City Dallas State TX Zip Code 75202-4206

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36440

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Burger King Franchisee PAC

Mailing Address 1701 Barrett Lakes Blvd NW Ste 180

City Kennesaw State GA Zip Code 30144-4561

FEC ID number of contributing federal political committee. **C C00329425**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 24 / 2013

Transaction ID : 31028.C36273

Amount of Each Receipt this Period
2600.00

Receipt

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

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

4100.00

**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 54 OF 90
	<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. Cigar-PAC

Full Name (Last, First, Middle Initial)
Cigar-PAC

Mailing Address 818 Connecticut Ave NW Ste 200

City Washington State DC Zip Code 20006-2742

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 200.00

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

Transaction ID : 31210.C36363

Amount of Each Receipt this Period
 200.00

In-Kind
 Cigars

B. COAL PAC

Full Name (Last, First, Middle Initial)
COAL 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** C00109819

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
 12 / 31 / 2013

Transaction ID : 40106.C36466

Amount of Each Receipt this Period
 1000.00

Receipt

C. Employees of Northrop Grumman PAC

Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman PAC

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 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36469

Amount of Each Receipt this Period
 2000.00

Receipt

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 55 OF 90
(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. 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 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : 40113.C36511
 Amount of Each Receipt this Period
 Receipt 3000.00

B. K&L Gates PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 K St NW
 City Washington State DC Zip Code 20006-1682
 FEC ID number of contributing federal political committee. **C** C00213173
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : 31009.C36242
 Amount of Each Receipt this Period
 Receipt 500.00

C. Lockheed Martin Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2121 Crystal Dr Ste 100
 City Arlington State VA Zip Code 22202-3706
 FEC ID number of contributing federal political committee. **C** C00303024
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 40106.C36439
 Amount of Each Receipt this Period
 Receipt 1000.00

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 90
	<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)
Lockheed Martin Employees PAC

Mailing Address 2121 Crystal Dr Ste 100

City State Zip Code
Arlington VA 22202-3706

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 20 / 2013

Transaction ID : 40106.C36438

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 6470 Freetown Rd Ste 200-62

City State Zip Code
Columbia MD 21044

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

Name of Employer Occupation

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
11 / 06 / 2013

Transaction ID : 31111.C36308

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Marathon Oil Company Employees PAC

Mailing Address 539 S Main St Rm. 2635

City State Zip Code
Findlay OH 45840-3229

FEC ID number of contributing federal political committee. **C** C00496307

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
10 / 30 / 2013

Transaction ID : 31104.C36276

Amount of Each Receipt this Period
5000.00

Receipt

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

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

6250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 90
	<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. Marathon Oil Company Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 539 S Main St
Rm. 2635
City Findlay State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C** C00496307

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
10 / 30 / 2013

Transaction ID : 31104.C36277

Amount of Each Receipt this Period
2500.00

Receipt

B. Maryland State Surgical PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1583
City Ellicott City State MD Zip Code 21041-1583

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 21 / 2013

Transaction ID : 31028.C36266

Amount of Each Receipt this Period
1000.00

Receipt

NOTE: STATE COMMITTEE

C. National Shooting Sports Foundation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 11 Mile Hill Rd
City Newtown State CT Zip Code 06470-2359

FEC ID number of contributing federal political committee. **C** C00480863

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
12 / 31 / 2013

Transaction ID : 40106.C36470

Amount of Each Receipt this Period
1000.00

Receipt

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 90
	<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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 / 2013

Transaction ID : 40113.C36517

Amount of Each Receipt this Period
 Receipt
 1000.00

B. Full Name (Last, First, Middle Initial)
Old Dominion Freight Line Inc PAC

Mailing Address 500 Old Dominion Way

City State Zip Code
Thomasville NC 27360-8923

FEC ID number of contributing federal political committee. **C** C00496836

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 05 / 2013

Transaction ID : 31210.C36371

Amount of Each Receipt this Period
 Receipt
 500.00

C. Full Name (Last, First, Middle Initial)
Pennsylvania Assoc of Private School PAC

Mailing Address 2090 Wexford Ct

City State Zip Code
Harrisburg PA 17112-1579

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 06 / 2013

Transaction ID : 31111.C36307

Amount of Each Receipt this Period
 Receipt
 100.00

NOTE: State Committee

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 59 OF 90
(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)
Reynolds American Inc. PAC

Mailing Address **PO Box 718**

City **Winston Salem** State **NC** Zip Code **27102-0718**

FEC ID number of contributing federal political committee. **C C00042002**

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
12 / 31 / 2013

Transaction ID : 40113.C36515

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **2200 Lake Blvd NE**

City **Atlanta** State **GA** Zip Code **30319-5310**

FEC ID number of contributing federal political committee. **C C00432823**

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
12 / 31 / 2013

Transaction ID : 40106.C36467

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Textron Inc. PAC

Mailing Address **PO Box 878**

City **Providence** State **RI** Zip Code **02901-0878**

FEC ID number of contributing federal political committee. **C C00123612**

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
11 / 12 / 2013

Transaction ID : 31118.C36325

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 60 OF 90
	<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)
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 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2013

Transaction ID : 31017.C36248

Amount of Each Receipt this Period
 -1000.00

Receipt

NOTE: Returned Check

B. 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 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36468

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).....

0.00

37015.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90
	<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 **361.14**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : 31104.C36279

Amount of Each Receipt this Period
 0.39

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 **427.42**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : 31104.C36280

Amount of Each Receipt this Period
 66.28

Other Receipt

NOTE: BANK INTEREST

C. 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 **492.46**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2013

Transaction ID : 31210.C36361

Amount of Each Receipt this Period
 65.04

Other Receipt

NOTE: BANK INTEREST

SUBTOTAL of Receipts This Page (optional).....	131.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 90
	<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 **494.48**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2013

Transaction ID : 31210.C36362

Amount of Each Receipt this Period
 2.02

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 **573.72**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36509

Amount of Each Receipt this Period
 79.24

Other Receipt

NOTE: BANK INTEREST

C. 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 **576.41**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : 40106.C36510

Amount of Each Receipt this Period
 2.69

Other Receipt

NOTE: BANK INTEREST

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

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

83.95

215.66

**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 63 OF 90	
	<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. Alliant Techsystems, Inc. PAC		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 1300 Wilson Blvd Ste 400		Amount of Each Disbursement this Period 365.45
City Arlington State VA Zip Code 22209-2307	Purpose of Disbursement Event Supplies	Transaction ID : 31104.C36278IK
Candidate Name	Category/Type	IN KIND: EVENT SUPPLIES
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. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1950.00
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software	Transaction ID : 31028.E5320
Candidate Name	Category/Type	SOFTWARE
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. Bankcard Center		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 1466.13
City Dallas State TX Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 31028.E5321
Candidate Name	Category/Type	SEE BELOW
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).....	3781.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 90	
	<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. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period 180.82
City San Antonio	State TX Zip Code 78205-2255	
Purpose of Disbursement Telephone	Candidate Name	Transaction ID : 40113.E5373
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TELEPHONE

Full Name (Last, First, Middle Initial) B. Exxon		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 5959 Las Colinas Blvd		Amount of Each Disbursement this Period 119.08
City Irving	State TX Zip Code 75039-4202	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 40113.E5375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial) C. Hertz		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 225 Brae Blvd		Amount of Each Disbursement this Period 38.75
City Park Ridge	State NJ Zip Code 07656-1870	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 40113.E5377
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE

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 65 OF 90			
	<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. PHD Fix Computer & Cell Phone		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 2330 York Rd		Amount of Each Disbursement this Period 130.00
City Luthvl Timon	State MD	Zip Code 21093-2216
Purpose of Disbursement Office Equipment Repair	Category/Type	
Candidate Name	Transaction ID : 40113.E5378	
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:	[MEMO ITEM] MEMO: OFFICE EQUIPMENT REPAIR	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 910 Louisiana St		Amount of Each Disbursement this Period 56.20
City Houston	State TX	Zip Code 77002-4916
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Transaction ID : 40113.E5379	
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:	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 1250 H St NW		Amount of Each Disbursement this Period 210.94
City Washington	State DC	Zip Code 20005-3952
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name	Transaction ID : 40113.E5380	
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:	[MEMO ITEM] MEMO: OFFICE SUPPLIES	

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 66 OF 90			
	<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. Staples

Mailing Address 1250 H St NW

City Washington State DC Zip Code 20005-3952

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 21 / 2013

Amount of Each Disbursement this Period: 316.00

Transaction ID : 40113.E5381

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. United States Postal Service

Mailing Address 475 Lenfant Plz SW

City Washington State DC Zip Code 20260-0001

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 21 / 2013

Amount of Each Disbursement this Period: 286.00

Transaction ID : 40113.E5383

[MEMO ITEM]
MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Virgin Mobile

Mailing Address 2185 N California Blvd

City Walnut Creek State CA Zip Code 94596-3500

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 21 / 2013

Amount of Each Disbursement this Period: 35.00

Transaction ID : 40113.E5384

[MEMO ITEM]
MEMO: TELEPHONE

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 67 OF 90			
	<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 M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 2793.13
City Dallas	State TX	Zip Code 75356-9200
Purpose of Disbursement See Below	Category/ Type	
Candidate Name	Transaction ID : 31125.E5339	
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. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address American Airlines Center		Amount of Each Disbursement this Period 334.80
City Dallas	State TX	Zip Code 75023-
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Transaction ID : 40113.E5385	
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: AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period 181.00
City San Antonio	State TX	Zip Code 78205-2255
Purpose of Disbursement Telephone	Category/ Type	
Candidate Name	Transaction ID : 40113.E5386	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2793.13
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 68 OF 90			
	<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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 811.45
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expenses	Transaction ID : 40113.E5387
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 EXPENSES
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 323.80
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Airfare	Transaction ID : 40113.E5388
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: AIRFARE
State: District:		

Full Name (Last, First, Middle Initial) C. Hotwire		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 333 108th Ave NE		Amount of Each Disbursement this Period 66.67
City Bellevue	State WA	
Zip Code 98004-5703	Purpose of Disbursement Lodging	Transaction ID : 40113.E5389
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: LODGING
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 69 OF 90			
	<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. National Pen Co.		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 55000		Amount of Each Disbursement this Period 298.50
City Detroit	State MI	Zip Code 48255-0001
Purpose of Disbursement Promotional Items - Pens	Category/ Type	
Candidate Name	Transaction ID : 40113.E5390	
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:	[MEMO ITEM] MEMO: PROMOTIONAL ITEMS - PENS	

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 379.30
City Phoenix	State AZ	Zip Code 85034-3802
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Transaction ID : 40113.E5394	
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:	[MEMO ITEM] MEMO: AIRFARE	

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 169.30
City Phoenix	State AZ	Zip Code 85034-3802
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Transaction ID : 40113.E5395	
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:	[MEMO ITEM] MEMO: AIRFARE	

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 70 OF 90	
	<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 M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 1992.08
City Dallas	State TX	
Zip Code 75356-9200	Purpose of Disbursement See Below	Transaction ID : 40106.E5365
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. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address American Airlines Center		Amount of Each Disbursement this Period -34.00
City Dallas	State TX	
Zip Code 75023-	Purpose of Disbursement Refund	Transaction ID : 40114.E5403
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) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period 358.62
City San Antonio	State TX	
Zip Code 78205-2255	Purpose of Disbursement Telephone	Transaction ID : 40114.E5404
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:		

SUBTOTAL of Disbursements This Page (optional).....	1992.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 90			
	<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. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 176.77
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting Expenses	Transaction ID : 40114.E5405
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 EXPENSES
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 19.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel Expense	Transaction ID : 40114.E5406
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:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 29.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel Expense	Transaction ID : 40114.E5407
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 72 OF 90			
	<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. Hotwire		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 333 108th Ave NE		Amount of Each Disbursement this Period 71.90
City Bellevue State WA Zip Code 98004-5703	Purpose of Disbursement Lodging	
Candidate Name	Category/Type	Transaction ID : 40114.E5408
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:		[MEMO ITEM] MEMO: LODGING

Full Name (Last, First, Middle Initial) B. Integram		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 22695 Commerce Center Ct Ste 170		Amount of Each Disbursement this Period 984.56
City Sterling State VA Zip Code 20166-2037	Purpose of Disbursement Direct Mail Production	
Candidate Name	Category/Type	Transaction ID : 40114.E5409
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:		[MEMO ITEM] MEMO: DIRECT MAIL PRODUCTION

Full Name (Last, First, Middle Initial) c. Royal Farms		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 930 Cromwell Park Dr		Amount of Each Disbursement this Period 104.98
City Glen Burnie State MD Zip Code 21061-2589	Purpose of Disbursement Travel Expense	
Candidate Name	Category/Type	Transaction ID : 40114.E5413
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:		[MEMO ITEM] MEMO: TRAVEL EXPENSE

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 73 OF 90			
	<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. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 158.00
City Washington State DC Zip Code 20260-0001	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : 40114.E5414
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:		

[MEMO ITEM]
MEMO: POSTAGE

Full Name (Last, First, Middle Initial) B. The Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2013
Mailing Address 1700 Diagonal Rd Ste 730		Amount of Each Disbursement this Period 513.00
City Alexandria State VA Zip Code 22314-2843	Purpose of Disbursement Conference Fees	
Candidate Name	Category/Type	Transaction ID : 31210.E5347
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:		

CONFERENCE FEES

Full Name (Last, First, Middle Initial) c. Donna Ennis		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 7291 Brick Kiln Rd		Amount of Each Disbursement this Period 210.10
City Salisbury State MD Zip Code 21801-2126	Purpose of Disbursement See Below	
Candidate Name	Category/Type	Transaction ID : 31017.E5316
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:		

SEE BELOW

SUBTOTAL of Disbursements This Page (optional).....	723.10
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 74 OF 90			
	<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. Donna Ennis		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 7291 Brick Kiln Rd		Amount of Each Disbursement this Period 200.00
City Salisbury	State MD Zip Code 21801-2126	
Purpose of Disbursement Field Consulting	Candidate Name	Transaction ID : 31017.E5317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FIELD CONSULTING

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 10.10
City Washington	State DC Zip Code 20260-0001	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : 31017.E5318
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: POSTAGE

Full Name (Last, First, Middle Initial) C. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 18.62
City Pittsburgh	State PA Zip Code 15250-7461	
Purpose of Disbursement Shipping	Candidate Name	Transaction ID : 31017.E5308
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	SHIPPING

SUBTOTAL of Disbursements This Page (optional).....	18.62
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 75 OF 90			
	<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. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 17.99
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Shipping	Transaction ID : 31125.E5341
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)	SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 13.59
City Pittsburgh	State PA	
Zip Code 15250-7461	Purpose of Disbursement Shipping	Transaction ID : 31210.E5345
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)	SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) c. Integram		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 22695 Commerce Center Ct Ste 170		Amount of Each Disbursement this Period 1538.23
City Sterling	State VA	
Zip Code 20166-2037	Purpose of Disbursement Direct Mail Production	Transaction ID : 40106.E5364
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)	DIRECT MAIL PRODUCTION
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1569.81
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 76 OF 90			
	<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 M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 708 Kentmorr Rd		Amount of Each Disbursement this Period 155.39
City Stevensville	State MD	
Zip Code 21666-3110	Purpose of Disbursement NOTE: No Itemization Necessary	Transaction ID : 31017.E5310
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)	NOTE: NO ITEMIZATION NECESSARY
State: District:		

Full Name (Last, First, Middle Initial) B. Maryland Republican Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 2000.00
City Annapolis	State MD	
Zip Code 21401-2730	Purpose of Disbursement Event Tickets	Transaction ID : 31017.E5309
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)	EVENT TICKETS
State: District:		

Full Name (Last, First, Middle Initial) C. Maryland Unemployment Insurance Fund		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 17291		Amount of Each Disbursement this Period 70.00
City Baltimore	State MD	
Zip Code 21297-0365	Purpose of Disbursement Insurance	Transaction ID : 31210.E5346
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)	INSURANCE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2225.39
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 77 OF 90			
	<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. PNC Bank - Jacksonville			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 3422 Sweet Air Rd			Amount of Each Disbursement this Period 73.63
City Phoenix	State MD	Zip Code 21131-1826	
Purpose of Disbursement Check Order		Category/ Type	Transaction ID : 40106.E5368
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)		CHECK ORDER
State: District:			

Full Name (Last, First, Middle Initial) B. Post Haste Mailing			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 90 Russell St Ste 100			Amount of Each Disbursement this Period 339.94
City Annapolis	State MD	Zip Code 21401-3651	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : 31028.E5319
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)		POSTAGE
State: District:			

Full Name (Last, First, Middle Initial) c. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 1915.00
City Washington	State DC	Zip Code 20260-0001	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : 31216.E5351
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)		POSTAGE
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2328.57
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 78 OF 90	
	<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. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 124.00
City Washington State DC Zip Code 20260-0001	Purpose of Disbursement PO Box Renewal	Transaction ID : 40106.E5361
Candidate Name	Category/Type	PO BOX RENEWAL
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. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 3135.88
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 31028.E5323
Candidate Name	Category/Type	COMPLIANCE CONSULTING
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. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 1585.24
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 31125.E5338
Candidate Name	Category/Type	COMPLIANCE CONSULTING
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).....	4845.12
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 79 OF 90			
	<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. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 2470 Daniells Bridge Rd Ste 121		Amount of Each Disbursement this Period 1504.60
City Athens State GA Zip Code 30606-6188	Purpose of Disbursement Compliance Consulting	Transaction ID : 40106.E5369
Candidate Name	Category/Type	COMPLIANCE CONSULTING
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. Amy Shuster		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
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 : 31028.E5322
Candidate Name	Category/Type	FUNDRAISING CONSULTING
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. Amy Shuster		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
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 : 31111.E5329
Candidate Name	Category/Type	FUNDRAISING CONSULTING
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).....	4504.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 90			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Amy Shuster			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013	
Mailing Address 135 E Clement St			Amount of Each Disbursement this Period 5882.08	
City Baltimore	State MD	Zip Code 21230-4510	Transaction ID : 31210.E5342	
Purpose of Disbursement Fundraising Consulting		Category/ Type	FUNDRAISING CONSULTING	
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. Amy Shuster			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013	
Mailing Address 135 E Clement St			Amount of Each Disbursement this Period 1500.00	
City Baltimore	State MD	Zip Code 21230-4510	Transaction ID : 31210.E5349	
Purpose of Disbursement Fundraising Consulting		Category/ Type	FUNDRAISING CONSULTING	
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. The M Group LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013	
Mailing Address 100 Luna Park Dr Apt 156			Amount of Each Disbursement this Period 8002.01	
City Alexandria	State VA	Zip Code 22305-3153	Transaction ID : 31111.E5330	
Purpose of Disbursement See Below		Category/ Type	SEE BELOW	
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).....	15384.09
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 81 OF 90			
	<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 M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 5850.00
City Alexandria State VA Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 31111.E5331
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. FedEx Kinkos		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 65.63
City Pittsburgh State PA Zip Code 15250-7461	Purpose of Disbursement Shipping	Transaction ID : 31111.E5332
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: SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 46.00
City Washington State DC Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : 31111.E5333
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:		

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 82 OF 90			
	<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. Tortilla Coast			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 400 1st St SE			Amount of Each Disbursement this Period 437.19
City Washington	State DC	Zip Code 20003-1826	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : 31111.E5334
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)		[MEMO ITEM] MEMO: MEETING EXPENSE
State: District:			

Full Name (Last, First, Middle Initial) B. Cava Mezze			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 527 8th St SE			Amount of Each Disbursement this Period 1560.00
City Washington	State DC	Zip Code 20003-2835	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : 31111.E5336
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)		[MEMO ITEM] MEMO: EVENT CATERING
State: District:			

Full Name (Last, First, Middle Initial) c. The M Group LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 100 Luna Park Dr Apt 156			Amount of Each Disbursement this Period 1870.00
City Alexandria	State VA	Zip Code 22305-3153	
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : 31125.E5340
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)		FUNDRAISING CONSULTING
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1870.00
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 83 OF 90			
	<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 M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 100 Luna Park Dr Apt 156		Amount of Each Disbursement this Period 1666.72
City Alexandria State VA Zip Code 22305-3153	Purpose of Disbursement Fundraising Consulting	Transaction ID : 40106.E5366
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. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 390.00
City Austin State TX Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	Transaction ID : 31111.E5328
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:		

Full Name (Last, First, Middle Initial) c. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 435.75
City Austin State TX Zip Code 78701-1054	Purpose of Disbursement CC Transaction Fees	Transaction ID : 31216.E5350
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).....	2492.47
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 84 OF 90	
	<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. Upstream Communications LP		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1609 Shoal Creek Blvd Suite 203		Amount of Each Disbursement this Period 727.70
City Austin	State TX Zip Code 78701-1054	
Purpose of Disbursement CC Transaction Fees	Category/Type	Transaction ID : 40113.E5402
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)	CC TRANSACTION FEES
State: District:		

Full Name (Last, First, Middle Initial) B. Wired for Victory		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 500.00
City Annapolis	State MD Zip Code 21404-2025	
Purpose of Disbursement Media Consulting	Category/Type	Transaction ID : 31104.E5326
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)	MEDIA CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) C. Wired for Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 500.00
City Annapolis	State MD Zip Code 21404-2025	
Purpose of Disbursement Media Consulting	Category/Type	Transaction ID : 40106.E5362
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)	MEDIA CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1727.70
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 85 OF 90		
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Andy Harris for Congress

Full Name (Last, First, Middle Initial) A. Wired for Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 2025		Amount of Each Disbursement this Period 500.00
City Annapolis	State MD	Zip Code 21404-2025
Purpose of Disbursement Media Consulting	Category/ Type	
Candidate Name	Transaction ID : 40106.E5367	
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) B. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
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	Category/ Type	
Candidate Name	Transaction ID : 31017.E5315	
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:		

Full Name (Last, First, Middle Initial) c. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 13401 Redcoat Ln		Amount of Each Disbursement this Period 51.60
City Phoenix	State MD	Zip Code 21131-2109
Purpose of Disbursement See Below	Category/ Type	
Candidate Name	Transaction ID : 31028.E5324	
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).....	1051.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 90			
	<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. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 51.60
City Washington State DC Zip Code 20260-0001	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : 31028.E5325
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:		[MEMO ITEM] MEMO: POSTAGE

Full Name (Last, First, Middle Initial) B. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
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	
Candidate Name	Category/Type	Transaction ID : 31104.E5327
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:		FINANCIAL CONSULTING

Full Name (Last, First, Middle Initial) c. Elizabeth Young		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
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	
Candidate Name	Category/Type	Transaction ID : 31210.E5344
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:		FINANCIAL CONSULTING

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	48307.86

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 90			
	<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. Benishek for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 108		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5355
City Gladstone State MI Zip Code 49837-0108	Purpose of Disbursement CONTRIBUTION	
Candidate Name DANIEL J BENISHEK	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 01		

Full Name (Last, First, Middle Initial) B. Citizens for Bongino		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 9455 Dunraven St		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5370
City Hampstead State MD Zip Code 21074-	Purpose of Disbursement CONTRIBUTION	
Candidate Name DANIEL BONGINO	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Coffman for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 4950 S. Yosemite St F2 #511		Amount of Each Disbursement this Period 500.00 Transaction ID : 40106.E5360
City Greenwood Village State CO Zip Code 80111-5690	Purpose of Disbursement CONTRIBUTION	
Candidate Name MICHAEL COFFMAN	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 06		

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 88 OF 90
	<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. Jaime for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 1614		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5359
City Ridgefield	State WA	
Zip Code 98642-0020	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name JAIME HERRERA BEUTLER	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: 03	

Full Name (Last, First, Middle Initial) B. Jenkins for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 727		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5357
City Huntington	State WV	
Zip Code 25711-0727	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name EVAN H JENKINS	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: WV District: 03	

Full Name (Last, First, Middle Initial) c. Mathis for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 2960 Pelham Pkwy		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5358
City Pelham	State AL	
Zip Code 35124-7700	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name CHAD DR MATHIS	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: AL District: 06	

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 89 OF 90
	<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. Mooney for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 1863		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5363
City Martinsburg State WV Zip Code 25402-1863	Purpose of Disbursement CONTRIBUTION	
Candidate Name ALEXANDER XAVIER MOONEY		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV District: 02		

Full Name (Last, First, Middle Initial) B. Mooney for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 1863		Amount of Each Disbursement this Period 1000.00 Transaction ID : 40106.E5356
City Martinsburg State WV Zip Code 25402-1863	Purpose of Disbursement CONTRIBUTION	
Candidate Name ALEXANDER XAVIER MOONEY		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV District: 02		

Full Name (Last, First, Middle Initial) c. National Republican Congressional Comm.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 6000.00 Transaction ID : 31118.E5337
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement CONTRIBUTION	
Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		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:		

SUBTOTAL of Disbursements This Page (optional).....	8000.00
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 90 OF 90	
	<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. National Republican Congressional Comm.		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 320 1st St SE		Amount of Each Disbursement this Period 6,000.00 Transaction ID : 31216.E5352
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement CONTRIBUTION	
Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		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. Southerland for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 1692		Amount of Each Disbursement this Period 1,000.00 Transaction ID : 40106.E5353
City Lynn Haven State FL Zip Code 32444-6492	Purpose of Disbursement CONTRIBUTION	
Candidate Name WILLIAM STEVE SOUTHERLAND II		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 02		

Full Name (Last, First, Middle Initial) c. Walorski for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address PO Box 954		Amount of Each Disbursement this Period 1,000.00 Transaction ID : 40106.E5354
City Mishawaka State IN Zip Code 46546-0954	Purpose of Disbursement CONTRIBUTION	
Candidate Name JACKIE (SWIHART) WALORSKI		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 02		

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	19500.00