

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
Rob Wittman for Congress

ADDRESS (number and street) PO Box 999
 Check if different than previously reported. (ACC) Montross VA 22520

2. **FEC IDENTIFICATION NUMBER** ▼ C C00441014 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) **OR** AMENDED (A) STATE ▼ DISTRICT
VA 01

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2015 through 09 / 30 / 2015

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 Steve Ralls

Signature of Treasurer Steve Ralls *[Electronically Filed]* Date M M / D D / Y Y Y Y
01 / 31 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Rob Wittman 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))....	130069.00	418867.56
(b) Total Contribution Refunds (from Line 20(d)) .....	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	130069.00	418867.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	62150.72	321056.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	.00	350.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62150.72	320706.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1021471.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.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

Rob Wittman 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).....	40180.00	145070.00
(ii) Unitemized.....	12189.00	40497.56
(iii) TOTAL of contributions from individuals ▶	52369.00	185567.56
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	77700.00	233300.00
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	130069.00	418867.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	.00	350.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	.00	.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	130069.00	419217.56

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62150.72	321056.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.00	.00
21. OTHER DISBURSEMENTS	31500.00	42390.95
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	93650.72	363447.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	985053.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	130069.00
25. SUBTOTAL (add Line 23 and Line 24).....	1115122.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	93650.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1021471.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Boswell's Used Auto Parts & Towing LLC

Mailing Address 3854 Jefferson Davis Hwy
PO Box 683

City Stafford State VA Zip Code 22555

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11Ai-CN19873

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Roy J Boswell

Mailing Address 3854 Jefferson Davis Hwy

City Stafford State VA Zip Code 22554

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

Name of Employer Occupation
 Boswell's Used Auto Parts Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11Ai-CN19874

Amount of Each Receipt this Period
 500.00

Partnership-Boswell's Used Auto Parts

[MEMO ITEM]
 \$500.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Hunton & Williams Pllc

Mailing Address 2200 Pennsylvania Ave NW

City Washington State DC Zip Code 20037

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20110

Amount of Each Receipt this Period
 1000.00

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 6 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Plantation Storage Bluffton

Mailing Address 94 N Main Street

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN19939

Amount of Each Receipt this Period
 540.00

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

Mailing Address 66 Crabshell Ln

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation
self-employed storage

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN20308

Amount of Each Receipt this Period
 540.00

Partnership-Plantation Storage Bluffton

[MEMO ITEM]
 \$540.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Plantation Storage Harscrabble

Mailing Address 94 N Main Street

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN19940

Amount of Each Receipt this Period
 540.00

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

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

1080.00

**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 74
	<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)
Rob Wittman for Congress

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

Mailing Address 66 Crabshell Ln

City Kilmarnock State VA Zip Code 22482

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

Name of Employer self-employed Occupation storage

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1080.00

Date of Receipt
08 / 31 / 2015

Transaction ID : SA11Ai-CN20309

Amount of Each Receipt this Period
540.00
Partnership-Plantation Storage Harscra

[MEMO ITEM]
\$540.00 MEMO Partnership Attributed

B. Full Name (Last, First, Middle Initial)
Plantation Storage Myrtle Beach

Mailing Address 94 N Main Street

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
540.00

Date of Receipt
08 / 31 / 2015

Transaction ID : SA11Ai-CN19942

Amount of Each Receipt this Period
540.00

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

Mailing Address 66 Crabshell Ln

City Kilmarnock State VA Zip Code 22482

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

Name of Employer self-employed Occupation storage

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2160.00

Date of Receipt
08 / 31 / 2015

Transaction ID : SA11Ai-CN20310

Amount of Each Receipt this Period
540.00
Partnership-Plantation Storage Myrtle

[MEMO ITEM]
\$540.00 MEMO Partnership Attributed

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

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

540.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Plantation Storage Sparkleberry

Mailing Address 94 N Main Street

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN19941

Amount of Each Receipt this Period
 540.00

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

Mailing Address 66 Crabshell Ln

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation
self-employed storage

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN20311

Amount of Each Receipt this Period
 540.00

Partnership-Plantation Storage Sparkle

[MEMO ITEM]
 \$540.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Southeast Management Company LLC

Mailing Address 94 N Main Street

City Kilmarnock State VA Zip Code 22482

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN19943

Amount of Each Receipt this Period
 540.00

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

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

1080.00

**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 74
	<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)
Rob Wittman for Congress

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

Mailing Address 66 Crabshell Ln

City Kilmarnock State VA Zip Code 22482

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

Name of Employer self-employed Occupation storage

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11Ai-CN20312

Amount of Each Receipt this Period
540.00

Partnership-Southeast Management Compa

[MEMO ITEM]
\$540.00 MEMO Partnership Attributed

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

Mailing Address 2916 Smithfield Ct

City Fredericksburg State VA Zip Code 22408

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

Name of Employer Jon Properties Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN20055

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Col. Armando J Arvizu

Mailing Address 11616 Hoover Lane

City Fredericksburg State VA Zip Code 22407

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11Ai-CN20040

Amount of Each Receipt this Period
250.00

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

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

2950.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Karen Barrs

Mailing Address 8066 Little England Rd

City Hayes State VA Zip Code 23072

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20085

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Mr. T. H. Birdsong III

Mailing Address P.O. Box 369

City White Stone State VA Zip Code 22578

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

Name of Employer Birdsong Peanuts Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN20010

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles R Black

Mailing Address 681 N Fairfax Ave # 402

City Alexandria State VA Zip Code 22314

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

Name of Employer Prime Policy Group Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN20018

Amount of Each Receipt this Period
 500.00

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 11 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr James A Branscome

Mailing Address 1400 Washington Ave

City Fredericksburg	State VA	Zip Code 22401
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20120

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Mason Brent

Mailing Address PO Box 755

City Heathsville	State VA	Zip Code 22473
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19969

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. William T Carreras

Mailing Address P O Box 1139

City Tappahannock	State VA	Zip Code 22560
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19960

Amount of Each Receipt this Period
90.00

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

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

590.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Dayle L Collins

Mailing Address 558 Creek View Ln

City Warsaw State VA Zip Code 22572

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN19996

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Jennifer E Crittenden

Mailing Address P O Box 29

City Hardyville State VA Zip Code 23070

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

Name of Employer Main Street Preservation Trust Occupation Executive Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : SA11Ai-CN19912

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Luke Curtas

Mailing Address 6601 Turkey Run Dr

City Fredericksburg State VA Zip Code 22407

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

Name of Employer Mid Atlantic Vinyl Products Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19984

Amount of Each Receipt this Period
 1500.00

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 13 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Donald W Dalrymple

Mailing Address 2801 - 34th PI NW

City Washington State DC Zip Code 20007

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

Name of Employer Dalrymple & Associates Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11Ai-CN20061

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. John F. Fick III

Mailing Address PO Box 7567

City Fredericksburg State VA Zip Code 22404

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

Name of Employer J F Fick Inc Occupation Corporate Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20105

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Admiral Robert R Fountain

Mailing Address 4750 Zacata Rd

City Montross State VA Zip Code 22520

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11Ai-CN20062

Amount of Each Receipt this Period
 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 14 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Charles P Gilchrist III

Mailing Address 402 Airport Rd

City Tappahannock State VA Zip Code 22560

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

Name of Employer Self Occupation Optometrist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 09 / 2015

Transaction ID : SA11Ai-CN20049

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen M. Goss

Mailing Address 11305 Beauclaire Boulevard

City Fredericksburg State VA Zip Code 22408

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

Name of Employer SimVentions Inc Occupation VP/CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : SA11Ai-CN20074

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Ms. Kaylene H. Green

Mailing Address PO Box 410

City Reedville State VA Zip Code 22539

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

Name of Employer Flagship Government Relations Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 17 / 2015

Transaction ID : SA11Ai-CN20052

Amount of Each Receipt this Period
 250.00

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 15 OF 74
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Mr Joe A Greene		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015
Mailing Address 131 Federal Dr		Transaction ID : SA11Ai-CN19864
City Fredericksburg	State VA	
Zip Code 22405		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Mr Joe A Greene		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address 131 Federal Dr		Transaction ID : SA11Ai-CN19993
City Fredericksburg	State VA	
Zip Code 22405		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Edward Gunderson		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2015
Mailing Address 5921 Amberwood Dr		Transaction ID : SA11Ai-CN19876
City Naples	State FL	
Zip Code 34110		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Sales	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	450.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr John J Huber

Mailing Address 1134 Glebe View Ln

City Lottsburg State VA Zip Code 22511

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19987

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Mr. James E Hyland

Mailing Address 1101 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

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

Name of Employer Pennsylvania Ave Group Occupation President & Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN20017

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr Douglas F Jenkins Jr

Mailing Address 86 Poplar Ct

City Warsaw State VA Zip Code 22572

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

Name of Employer Bank Of Lancaster Occupation Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2015

Transaction ID : SA11Ai-CN19826

Amount of Each Receipt this Period
250.00

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

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

2750.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Joyce Johnson

Mailing Address 1176 Orlo Dr

City State Zip Code
Mc Lean VA 22102

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2015

Transaction ID : SA11Ai-CN19878

Amount of Each Receipt this Period
2700.00

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

Mailing Address 1176 Orlo Dr

City State Zip Code
Mc Lean VA 22102

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

Name of Employer Occupation
The Johnson Group Film Producer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2015

Transaction ID : SA11Ai-CN19877

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert S Larose

Mailing Address 4511 Singer Ct # 150

City State Zip Code
Chantilly VA 20151

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

Name of Employer Occupation
Agilex Technologies Inc Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN20016

Amount of Each Receipt this Period
2000.00

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

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

7400.00

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

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

FOR LINE NUMBER: PAGE 18 OF 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jackson T McBroom

Mailing Address 1661 River Rdg

City State Zip Code
Williamsburg VA 23185

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 29 2015

Transaction ID : SA11Ai-CN20076

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles G. McDaniel

Mailing Address 133 Caroline St

City State Zip Code
Fredericksburg VA 22401

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

Name of Employer Occupation
Hilldrup Companies Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 22 2015

Transaction ID : SA11Ai-CN20054

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Carolyn E McDonnell

Mailing Address 1193 Starr Way

City State Zip Code
Virginia Beach VA 23454

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

Name of Employer Occupation
Military Produce Group Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 15 2015

Transaction ID : SA11Ai-CN19979

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 74
	<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)
Rob Wittman for Congress

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

Mailing Address 513 Charlotte St

City Fredericksbrg State VA Zip Code 22401

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

Name of Employer Self Occupation Lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20084

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. William Sheppard Miller III

Mailing Address 5310 Edgewater Dr

City Norfolk State VA Zip Code 23508

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

Name of Employer KITCO Fiber Optics Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19967

Amount of Each Receipt this Period
 1350.00

C. Full Name (Last, First, Middle Initial)
Mr Jonathan K Pittman

Mailing Address 10604 Mystic Point Dr

City Fredericksburg State VA Zip Code 22407

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

Name of Employer Radley Chevrolet Occupation General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20104

Amount of Each Receipt this Period
 250.00

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

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

2100.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Geoffrey Pohanka Pohanka

Mailing Address 2120 Polo Pointe Drive

City Vienna	State VA	Zip Code 22181
----------------	-------------	-------------------

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

Name of Employer Pohanka Honda	Occupation Auto Dealer
-----------------------------------	---------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20077

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Mr Allen T Pugh

Mailing Address 3255 Islington Rd

City Warsaw	State VA	Zip Code 22572
----------------	-------------	-------------------

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

Name of Employer AI Pugh Distribution	Occupation Owner
--	---------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20106

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred M. Rankin

Mailing Address 4 Derby Dr

City Fredericksburg	State VA	Zip Code 22405
------------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11Ai-CN20103

Amount of Each Receipt this Period
500.00

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

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

3700.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gilbert L. Shelton

Mailing Address 18253 Moss Neck Manor Rd

City Fredericksburg	State VA	Zip Code 22408
------------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Investor - Economist
-----------------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2015

Transaction ID : SA11Ai-CN20057

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Mr. Edwin E. Smith Jr.

Mailing Address PO Box 878

City Tappahannock	State VA	Zip Code 22560
----------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19950

Amount of Each Receipt this Period
90.00

C. Full Name (Last, First, Middle Initial)
Mrs. Dorcas Hardy Spagnolo

Mailing Address 11407 Stonewall Jackson Dr

City Spotsylvania	State VA	Zip Code 22551
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FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation consultant
-----------------------------------	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11Ai-CN20046

Amount of Each Receipt this Period
500.00

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

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

3290.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth Stroud

Mailing Address 150 Riverside Pkwy
Ste 311

City Fredericksburg State VA Zip Code 22406

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

Name of Employer Professional Solutions Delivered Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11Ai-CN20059

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Mr Jeffrey M Szyperski

Mailing Address PO Box 38

City Irvington State VA Zip Code 22480

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

Name of Employer Chesapeake Bank Occupation Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11Ai-CN19997

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Trent C Taliaferro

Mailing Address 416 Wharf Rd

City Tappahannock State VA Zip Code 22560

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

Name of Employer Teakwood Enterprises Occupation Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19968

Amount of Each Receipt this Period
 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 23 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Martha G. Welch

Mailing Address 255 Candy Point Rd

City Heathsville State VA Zip Code 22473

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11Ai-CN19958

Amount of Each Receipt this Period
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

40180.00

**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 74
	<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)
Rob Wittman for Congress

A. American Bankers Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 Connecticut Ave NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C C00004275**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015
Transaction ID : SA11C-CN20028
 Amount of Each Receipt this Period
 1000.00

B. American Council of Engineering Companies PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 15th St NW Suite 802
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C C00010868**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015
Transaction ID : SA11C-CN19832
 Amount of Each Receipt this Period
 2500.00

C. American Federation Of Government Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 F St NW
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00009936**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11C-CN20113
 Amount of Each Receipt this Period
 2500.00

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
American Maritime Officers Voluntary PAC

Mailing Address PO Box 66

City State Zip Code
Dania Beach FL 33004

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN19830

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
American Sportfishing Association

Mailing Address 225 Reinskens Lane
Ste 420

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C C00249532**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20098

Amount of Each Receipt this Period
700.00

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

Mailing Address 1735 New York Ave NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C C00139071**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN19833

Amount of Each Receipt this Period
1000.00

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

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

4200.00

**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 74
	<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	

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

NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Associated Builders and Contractors PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4250 Fairfax Dr 9th Floor N
 City State Zip Code
 Arlington VA 22203
 FEC ID number of contributing federal political committee. **C C00010421**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : SA11C-CN20011
 Amount of Each Receipt this Period
 1000.00

B. Associated General Contractors of America PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2300 Wilson Blvd Suite 400
 City State Zip Code
 Arlington VA 22201
 FEC ID number of contributing federal political committee. **C C00082917**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : SA11C-CN19983
 Amount of Each Receipt this Period
 2500.00

C. Bloomin' Brands PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2202 N Westshore Blvd
 City State Zip Code
 Tampa FL 33607
 FEC ID number of contributing federal political committee. **C C00253153**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11C-CN20124
 Amount of Each Receipt this Period
 2000.00

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 74
	<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)
Rob Wittman for Congress

A. Burson-Marsteller Young & Rubicam PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1110 Vermont Ave NW
Ste 1000
City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00201863**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : SA11C-CN20019

Amount of Each Receipt this Period
1000.00

B. Cox Enterprises PAC

Full Name (Last, First, Middle Initial)
Mailing Address 975 F St NW
Ste 300
City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN20111

Amount of Each Receipt this Period
2500.00

C. Cox Enterprises PAC

Full Name (Last, First, Middle Initial)
Mailing Address 975 F St NW
Ste 300
City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN20122

Amount of Each Receipt this Period
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 74
	<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	

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

NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Crowley Maritime Corporation PAC

Mailing Address 9487 Regency Square BLVD

City Jacksonville	State FL	Zip Code 32225
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147231

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11C-CN19977

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Deloitte Federal Political Action Committee

Mailing Address PO Box 365

City Washington	State DC	Zip Code 20044
--------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11C-CN19990

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Deloitte Federal Political Action Committee

Mailing Address PO Box 365

City Washington	State DC	Zip Code 20044
--------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11C-CN20005

Amount of Each Receipt this Period
5000.00

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

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

11000.00

**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 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Dyncorp International LLC PAC

Mailing Address 3190 Fairview Park Dr
Ste 700

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00409979**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2015

Transaction ID : SA11C-CN19945

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3 Bethesda Metro Center Suite 1100

City Bethesda State MD Zip Code 20814

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11C-CN19963

Amount of Each Receipt this Period
2000.00

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

Mailing Address 2980 Fairview Park Drive

City Falls Church State VA Zip Code 22042

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN20091

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 74
	<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	

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

NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Employees of Northrop Grumman Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2980 Fairview Park Drive

City Falls Church	State VA	Zip Code 22042
----------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20092

Amount of Each Receipt this Period
2500.00

B. Farm Credit Council Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 50 F St NW
Suite 900

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193631

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11C-CN20021

Amount of Each Receipt this Period
750.00

C. Federal Managers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1641 Prince St

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00164848

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20095

Amount of Each Receipt this Period
1000.00

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

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

4250.00

**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 74
	<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)
Rob Wittman for Congress

A. Fire PAC

Full Name (Last, First, Middle Initial)
Fire PAC

Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : SA11C-CN19961

Amount of Each Receipt this Period
 1000.00

B. Fraternity & Sorority Political Action Committee

Full Name (Last, First, Middle Initial)
Fraternity & Sorority Political Action Committee

Mailing Address PO Box 3435

City Alexandria State VA Zip Code 22302

FEC ID number of contributing federal political committee. **C C00410068**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11C-CN19944

Amount of Each Receipt this Period
 1000.00

C. Hardwood Federation PAC

Full Name (Last, First, Middle Initial)
Hardwood Federation PAC

Mailing Address 1101 K Street NW
Suite 700

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00396671**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : SA11C-CN20020

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Harris Corporation Political Action Committee

Mailing Address 600 Maryland Ave. SW Suite 850E

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20118

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Huntington Ingalls Industries PAC

Mailing Address 300 M St SE Suite 350

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20109

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Huntington Ingalls Industries PAC

Mailing Address 300 M St SE Suite 350

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20123

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 33 OF 74
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Micron Technology Inc PAC

Mailing Address 8000 S Federal Way

City State Zip Code
Boise ID 83716

FEC ID number of contributing federal political committee. **C** C00443671

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : SA11C-CN20015

Amount of Each Receipt this Period
5000.00

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

Mailing Address 1600 Duke St

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11C-CN19982

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
National Assn of Insurance & Financial Advisors PAC

Mailing Address 2901 Telestar Ct

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN20119

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 74
	<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)
Rob Wittman for Congress

A. National Emergency Medicine PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 619911
 City Dallas State TX Zip Code 75261
 FEC ID number of contributing federal political committee. **C** C00140061
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11C-CN20094
 Amount of Each Receipt this Period
 1500.00

B. National Marine Manufacturers Association Boat PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 North Capitol St NW Suite 645
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00245548
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : SA11C-CN20047
 Amount of Each Receipt this Period
 4000.00

C. National Rifle Association of America PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 11250 Waples Mill Rd
 City Fairfax State VA Zip Code 22030
 FEC ID number of contributing federal political committee. **C** C00053553
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11C-CN20099
 Amount of Each Receipt this Period
 1000.00

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

6500.00

**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 74
	<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)
Rob Wittman for Congress

A. National Shooting Sports Foundation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 400 N Capitol St NW
Ste 490

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : SA11C-CN20060

Amount of Each Receipt this Period
 1500.00

B. NMHC PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1850 M Street NW
Ste 540

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN19831

Amount of Each Receipt this Period
 1000.00

C. NRDC Action Fund Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 40 W 20th St
11th Floor

City New York State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C C00548008**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11C-CN19879

Amount of Each Receipt this Period
 250.00

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

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

2750.00

**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 74
	<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	

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

NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Orbital ATK Inc. PAC

Mailing Address 1300 Wilson Blvd ste 400

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20093

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Raytheon Company Political Action Committee

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11C-CN20031

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Raytheon Company Political Action Committee

Mailing Address 1100 Wilson Blvd Suite 1500

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2015

Transaction ID : SA11C-CN20032

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 74
	<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	

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

NAME OF COMMITTEE (In Full)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Science Applications Int'l Corp PAC

Mailing Address 151 Lafayette Drive

City State Zip Code
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : SA11C-CN19985

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Science Applications Int'l Corp PAC

Mailing Address 151 Lafayette Drive

City State Zip Code
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C-CN20097

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Seafarers Political Action Committee

Mailing Address 5201 Auth Way

City State Zip Code
Camp Springs MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11C-CN19834

Amount of Each Receipt this Period
2500.00

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 38 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
Smith & Wesson Holding Corporation Political Actio

Mailing Address 2100 Roosevelt Ave

City Springfield State MA Zip Code 01104

FEC ID number of contributing federal political committee. **C** C00419051

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20096

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Space Exploration Technologies Corp PAC

Mailing Address 1 Rocket Rd

City Hawthorne State CA Zip Code 90250

FEC ID number of contributing federal political committee. **C** C00411116

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015

Transaction ID : SA11C-CN19829

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Textron Inc. Political Action Committee

Mailing Address 40 Westminster St

City Providence State RI Zip Code 02903

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C-CN20100

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 74
	<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)
Rob Wittman for Congress

A. Full Name (Last, First, Middle Initial)
United Technologies Employee PAC

Mailing Address 1101 Pennsylvania Ave NW
10th Floor

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11C-CN20048

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

77700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address PO Box 660720		Amount of Each Disbursement this Period 212.37
City Dallas	State TX		Transaction ID : SB17-EX3348
Purpose of Disbursement Telephone Expense	Zip Code 75266	Telephone Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address PO Box 660720		Amount of Each Disbursement this Period 203.27
City Dallas	State TX		Transaction ID : SB17-EX3294
Purpose of Disbursement Telephone Expense	Zip Code 75266	Telephone Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address PO Box 660720		Amount of Each Disbursement this Period 295.92
City Dallas	State TX		Transaction ID : SB17-EX3303
Purpose of Disbursement Telephone Expense	Zip Code 75266	Telephone Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	711.56
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 41 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 65.12
City Lehigh Valley	State PA		Transaction ID : SB17-EX3295
Purpose of Disbursement Campaign Cell Phone	Zip Code 18002	Campaign Cell Phone
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 95.72
City Lehigh Valley	State PA		Transaction ID : SB17-EX3325
Purpose of Disbursement Campaign Cell Phone	Zip Code 18002	Campaign Cell Phone
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 1908.13
City Washington	State DC		Transaction ID : SB17-EX3297
Purpose of Disbursement Food and Beverage	Zip Code 20003	Food and Beverage
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2068.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Dominion Virginia Power			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address PO Box 26543			Amount of Each Disbursement this Period 99.74
City Richmond	State VA	Zip Code 23290	
Purpose of Disbursement Office Utilities	Candidate Name		Transaction ID : SB17-EX3347
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Office Utilities

Full Name (Last, First, Middle Initial) B. Dominion Virginia Power			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address PO Box 26543			Amount of Each Disbursement this Period 77.16
City Richmond	State VA	Zip Code 23290	
Purpose of Disbursement Office Utilities	Candidate Name		Transaction ID : SB17-EX3292
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Office Utilities

Full Name (Last, First, Middle Initial) C. Dominion Virginia Power			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address PO Box 26543			Amount of Each Disbursement this Period 46.14
City Richmond	State VA	Zip Code 23290	
Purpose of Disbursement Office Utilities	Candidate Name		Transaction ID : SB17-EX3300
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Office Utilities

SUBTOTAL of Disbursements This Page (optional).....	223.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 74		
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Carver Partners Lp Llc		Date of Disbursement MM / DD / YYYY 07 / 29 / 2015
Mailing Address PO Box 334		Amount of Each Disbursement this Period 400.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Rent	Transaction ID : SB17-EX3269
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Rent
State: District:		

Full Name (Last, First, Middle Initial) B. Carver Partners Lp Llc		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address PO Box 334		Amount of Each Disbursement this Period 400.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Rent	Transaction ID : SB17-EX3283
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Rent
State: District:		

Full Name (Last, First, Middle Initial) C. Carver Partners Lp Llc		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address PO Box 334		Amount of Each Disbursement this Period 400.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Rent	Transaction ID : SB17-EX3326
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Rent
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1200.00
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 44 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Town of Montross			Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address PO Box 126			Amount of Each Disbursement this Period 27.50
City Montross	State VA	Zip Code 22520	
Purpose of Disbursement Utility Expense	Candidate Name		Transaction ID : SB17-EX3251
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Utility Expense
State: District:			

Full Name (Last, First, Middle Initial) B. Town of Montross			Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address PO Box 126			Amount of Each Disbursement this Period 32.50
City Montross	State VA	Zip Code 22520	
Purpose of Disbursement Utility Expense	Candidate Name		Transaction ID : SB17-EX3281
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Utility Expense
State: District:			

Full Name (Last, First, Middle Initial) C. Town of Montross			Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address PO Box 126			Amount of Each Disbursement this Period 27.50
City Montross	State VA	Zip Code 22520	
Purpose of Disbursement Utility Expense	Candidate Name		Transaction ID : SB17-EX3293
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Utility Expense
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	87.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Robert Wittman		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address PO Box 999		Amount of Each Disbursement this Period 1465.62
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Mileage Reimbursement	Transaction ID : SB17-EX3266
Candidate Name Robert Wittman	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mileage Reimbursement
State: VA District: 01		

Full Name (Last, First, Middle Initial) B. Executive Press Inc.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 10412 Main St		Amount of Each Disbursement this Period 3738.18
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Direct Mail	Transaction ID : SB17-EX3279
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Direct Mail
State: District:		

Full Name (Last, First, Middle Initial) C. Westmoreland Co Treasurer		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address PO Box 730		Amount of Each Disbursement this Period 122.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Utilities	Transaction ID : SB17-EX3252
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Utilities
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5325.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 74	
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Westmoreland Co Treasurer		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address PO Box 730		Amount of Each Disbursement this Period 122.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Utilities	Transaction ID : SB17-EX3299
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) B. Visa Card Bank Of Lancaster		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address P O Box 30131		Amount of Each Disbursement this Period 2093.26
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Transaction ID : SB17-EX3311
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) c. River Market		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 1 Rappahannock Dr		Amount of Each Disbursement this Period 1080.00
City White Stone	State VA	
Zip Code 22578	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3305
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2215.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Potbelly		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 1900 L St NW		Amount of Each Disbursement this Period 177.09
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3306
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Event Farm		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 248 Victoria St Suite 8		Amount of Each Disbursement this Period 150.00
City Cosa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Event Tickets	Transaction ID : SB17-EX3307
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Event Tickets
State: District:		

Full Name (Last, First, Middle Initial) c. City Of Alexandria		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 301 King St		Amount of Each Disbursement this Period 3.50
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Parking	Transaction ID : SB17-EX3308
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Parking
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 48 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 50 Independence Ave SW Room 2106		Amount of Each Disbursement this Period 174.00
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Postage	Transaction ID : SB17-EX3309
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) B. Pierce's Pitt Bar-B-Que		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 447 E Rochambeau Dr		Amount of Each Disbursement this Period 508.67
City Williamsburg	State VA	
Zip Code 23188	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3310
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Visa Card Bank Of Lancaster		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address P O Box 30131		Amount of Each Disbursement this Period 28.54
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Transaction ID : SB17-EX3320
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	28.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 28.54
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3319
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Visa Card Bank Of Lancaster		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address P O Box 30131		Amount of Each Disbursement this Period 288.15
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Transaction ID : SB17-EX3324
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CREDIT CARD PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 50 Independence Ave SW Room 2106		Amount of Each Disbursement this Period 150.60
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Postage	Transaction ID : SB17-EX3321
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	288.15
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 50 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address 3301 Jeff Davis Hwy		Amount of Each Disbursement this Period 137.55
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Toner & Copy Paper	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3323	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Toner & Copy Paper
State: District:		

Full Name (Last, First, Middle Initial) B. Westmoreland News		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address P O Box 8		Amount of Each Disbursement this Period 245.00
City Warsaw	State VA	Zip Code 22572
Purpose of Disbursement Print Advertising	Category/ Type 004	
Candidate Name	Transaction ID : SB17-EX3265	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Print Advertising
State: District:		

Full Name (Last, First, Middle Initial) c. The Catalyst Group RW LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330		Amount of Each Disbursement this Period 6726.11
City Washington	State DC	Zip Code 20003
Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 003	
Candidate Name	Transaction ID : SB17-EX3312	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6971.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Geppetto Catering Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 4505 Queensbury Rd			Amount of Each Disbursement this Period 810.50
City Riverdale	State MD	Zip Code 20737	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX3313 [MEMO ITEM]
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Hill Country Barbecue Market			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 410 7th St NW			Amount of Each Disbursement this Period 854.06
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Food and Beverage		Category/ Type 003	Transaction ID : SB17-EX3314 [MEMO ITEM]
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Wound Tight Sportfishing			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 8220 F St			Amount of Each Disbursement this Period 1283.00
City Chesapeake Beach	State MD	Zip Code 20732	
Purpose of Disbursement Fishing Charter		Category/ Type 003	Transaction ID : SB17-EX3315 [MEMO ITEM]
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
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 52 OF 74	
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Bistro Bis		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 15 E St NW		Amount of Each Disbursement this Period 1167.88
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX3316 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 210.67
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Food and Beverage	Category/Type 003	Transaction ID : SB17-EX3317 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Catalyst Group RW LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330		Amount of Each Disbursement this Period 2400.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising Retainer	Category/Type 003	Transaction ID : SB17-EX3318 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
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 53 OF 74	
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group RW LLC			Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330			Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17-EX3289
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003	Fundraising Consultant
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. The Catalyst Group RW LLC			Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330			Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17-EX3302
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003	Fundraising Consultant
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Alice Payne Accounting & Tax Service			Date of Disbursement MM / DD / YYYY 09 / 03 / 2015
Mailing Address 17190 Kings Hwy			Amount of Each Disbursement this Period 75.00 Transaction ID : SB17-EX3291
City Montross	State VA	Zip Code 22520	
Purpose of Disbursement Payroll Service		Category/ Type 001	Payroll Service
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	4875.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Windsor-Mount Joy Mutual Insurance Co			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address P O Box 587			Amount of Each Disbursement this Period 387.00
City Ephrata	State PA	Zip Code 17522	Transaction ID : SB17-EX3296
Purpose of Disbursement Campaign Office Insurance		001 Category/ Type	
Candidate Name			Campaign Office Insurance
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 2.30
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3254
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 2.00
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3255
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	391.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 42.20
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3354
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 4.30
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3329
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 15.50
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3330
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	44.00
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 56 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 325.00
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3331
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 15.50
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3332
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 15.50
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3333
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	356.00
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 57 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 40.50
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3352
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 3.50
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3334
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 21.40
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3335
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	65.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 197.70
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3349
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 166.60
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3350
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 120.50
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3351
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	484.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 12.80
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3353
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

Full Name (Last, First, Middle Initial) B. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 108.50
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3355
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

Full Name (Last, First, Middle Initial) c. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 167.50
City Sacramento	State CA	Zip Code 95814	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX3356
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Processing Fee
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	288.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Capitol Tech Solutions			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 1225 8th Street # 425			Amount of Each Disbursement this Period 79.60
City Sacramento	State CA	Zip Code 95814	Transaction ID : SB17-EX3357
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	
Candidate Name			Credit Card Processing Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Virginia Department Of Taxation			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address P O Box 27264			Amount of Each Disbursement this Period 304.00
City Richmond	State VA	Zip Code 23261	Transaction ID : SB17-EX3336
Purpose of Disbursement Va Income Tax Withholdings		Category/ Type 001	
Candidate Name			Va Income Tax Withholdings
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Virginia Department Of Taxation			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2015
Mailing Address P O Box 27264			Amount of Each Disbursement this Period 304.00
City Richmond	State VA	Zip Code 23261	Transaction ID : SB17-EX3341
Purpose of Disbursement VA Income Tax Withholdings		Category/ Type 001	
Candidate Name			VA Income Tax Withholdings
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	687.60
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 61 OF 74			
	<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)
Rob Wittman for Congress

A. Virginia Department Of Taxation

Full Name (Last, First, Middle Initial)
Mailing Address P O Box 27264

City Richmond State VA Zip Code 23261

Purpose of Disbursement VA Income Tax Withholdings

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 09 / 14 / 2015

Amount of Each Disbursement this Period: 304.00

Transaction ID : SB17-EX3342

VA Income Tax Withholdings

B. U S Treasury

Full Name (Last, First, Middle Initial)
Mailing Address P O Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal Withholding Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2015

Amount of Each Disbursement this Period: 1842.00

Transaction ID : SB17-EX3337

Federal Withholding Taxes

c. U S Treasury

Full Name (Last, First, Middle Initial)
Mailing Address P O Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal Withholding Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 07 / 29 / 2015

Amount of Each Disbursement this Period: 24.00

Transaction ID : SB17-EX3340

Federal Withholding Taxes

SUBTOTAL of Disbursements This Page (optional)..... 2170.00

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 62 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. U S Treasury		Date of Disbursement MM / DD / YYYY 08 / 10 / 2015
Mailing Address P O Box 804522		Amount of Each Disbursement this Period 1842.00
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement Federal Withholding Taxes	Category/Type 001	Transaction ID : SB17-EX3338
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Federal Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) B. U S Treasury		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address P O Box 804522		Amount of Each Disbursement this Period 1842.00
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement Federal Withholding Taxes	Category/Type 001	Transaction ID : SB17-EX3339
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Federal Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1662.25
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement PAYMENT: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX3257
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5346.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1650.00
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Accounting Services	Category/Type 001	Transaction ID : SB17-EX3258 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 12.25
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement Postage Reimbursement	Category/Type 001	Transaction ID : SB17-EX3259 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1130.14
City Warrenton	State VA Zip Code 20186	
Purpose of Disbursement PAYMENT: SEE BELOW	Category/Type 001	Transaction ID : SB17-EX3274 PAYMENT: SEE BELOW
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1130.14
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 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1100.00
City Warrenton	State VA	
Zip Code 20186	Purpose of Disbursement Accounting Services	Transaction ID : SB17-EX3275
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 30.14
City Warrenton	State VA	
Zip Code 20186	Purpose of Disbursement Postage Reimbursement	Transaction ID : SB17-EX3276
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1106.37
City Warrenton	State VA	
Zip Code 20186	Purpose of Disbursement PAYMENT: SEE BELOW	Transaction ID : SB17-EX3343
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1106.37
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 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 1100.00
City Warrenton	State VA	
Zip Code 20186	Purpose of Disbursement Accounting Services	Transaction ID : SB17-EX3344
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2015
Mailing Address 332 W Lee Hwy # 303		Amount of Each Disbursement this Period 6.37
City Warrenton	State VA	
Zip Code 20186	Purpose of Disbursement Postage Reimbursement	Transaction ID : SB17-EX3345
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Robert Nelson		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 1829 Bay St SE		Amount of Each Disbursement this Period 6208.71
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement PAYMENT: SEE BELOW	Transaction ID : SB17-EX3260
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PAYMENT: SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6208.71
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 74	
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Robert Nelson		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 1829 Bay St SE		Amount of Each Disbursement this Period 6000.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Retainer	Transaction ID : SB17-EX3261
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Capital Grille		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 601 Pennsylvania Ave NW		Amount of Each Disbursement this Period 131.93
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3262
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Evo Bistro		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 1313 Old Chain Bridge Rd		Amount of Each Disbursement this Period 76.78
City Mc Lean	State VA	
Zip Code 22101	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX3263
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
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 67 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Stacy Whitehouse		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 10529 Assembly Dr		Amount of Each Disbursement this Period 1348.17
City Fairfax	State VA		Transaction ID : SB17-EX3271
Purpose of Disbursement Payroll/Salary	Zip Code 22030	Payroll/Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stacy Whitehouse		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 10529 Assembly Dr		Amount of Each Disbursement this Period 587.91
City Fairfax	State VA		Transaction ID : SB17-EX3272
Purpose of Disbursement Mileage Reimbursement	Zip Code 22030	Mileage Reimbursement
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stacy Whitehouse		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2015
Mailing Address 10529 Assembly Dr		Amount of Each Disbursement this Period 1348.17
City Fairfax	State VA		Transaction ID : SB17-EX3285
Purpose of Disbursement Payroll/Salary	Zip Code 22030	Payroll/Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3284.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Stacy Whitehouse			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2015	
Mailing Address 10529 Assembly Dr			Amount of Each Disbursement this Period 1348.17	
City Fairfax	State VA	Zip Code 22030	Transaction ID : SB17-EX3328	
Purpose of Disbursement Payroll/Salary		Category/ Type 001	Payroll/Salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. i360 LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015	
Mailing Address PO Box 37046			Amount of Each Disbursement this Period 500.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SB17-EX3247	
Purpose of Disbursement Website Hosting		Category/ Type 001	Website Hosting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. i360 LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015	
Mailing Address PO Box 37046			Amount of Each Disbursement this Period 500.00	
City Baltimore	State MD	Zip Code 21297	Transaction ID : SB17-EX3346	
Purpose of Disbursement Website Hosting		Category/ Type 001	Website Hosting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2348.17
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 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. i360 LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address PO Box 37046		Amount of Each Disbursement this Period 500.00
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Website Hosting	Transaction ID : SB17-EX3277
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Website Hosting
State: District:		

Full Name (Last, First, Middle Initial) B. Holden Lawn Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 62 Glenn St		Amount of Each Disbursement this Period 140.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Maintenance	Transaction ID : SB17-EX3250
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Maintenance
State: District:		

Full Name (Last, First, Middle Initial) C. Holden Lawn Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2015
Mailing Address 62 Glenn St		Amount of Each Disbursement this Period 105.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Maintenance	Transaction ID : SB17-EX3280
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Maintenance
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	745.00
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 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Holden Lawn Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 62 Glenn St		Amount of Each Disbursement this Period 140.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Maintenance	Transaction ID : SB17-EX3298
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Maintenance
State: District:		

Full Name (Last, First, Middle Initial) B. Holden Lawn Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 62 Glenn St		Amount of Each Disbursement this Period 70.00
City Montross	State VA	
Zip Code 22520	Purpose of Disbursement Office Maintenance	Transaction ID : SB17-EX3301
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Maintenance
State: District:		

Full Name (Last, First, Middle Initial) c. Porter Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 11 D Street NE		Amount of Each Disbursement this Period 200.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Room Rental	Transaction ID : SB17-EX3253
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Room Rental
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	410.00
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 71 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Garrison Coward		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 731.58
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Mileage Reimbursement	Category/Type 002	Transaction ID : SB17-EX3246
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) B. Garrison Coward		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 3680.50
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Payroll/Salary	Category/Type 001	Transaction ID : SB17-EX3270
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll/Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Garrison Coward		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 703.10
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Mileage Reimbursement	Category/Type 002	Transaction ID : SB17-EX3256
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mileage Reimbursement
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5115.18
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 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Garrison Coward		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 3680.50
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Payroll/Salary	Category/Type 001	Transaction ID : SB17-EX3284
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll/Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Garrison Coward		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 336.42
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Mileage Reimbursement	Category/Type 002	Transaction ID : SB17-EX3290
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) c. Garrison Coward		Date of Disbursement MM / DD / YYYY 09 / 28 / 2015
Mailing Address 1001 E Main St		Amount of Each Disbursement this Period 3680.50
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Payroll/Salary	Category/Type 001	Transaction ID : SB17-EX3327
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll/Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7697.42
TOTAL This Period (last page this line number only).....	61874.32

**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 74	
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 320 First Street SE		Amount of Each Disbursement this Period 30000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF EXCESS FUNDS	
Candidate Name	Category/Type 011	Transaction ID : SB21-EX3268
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	TRANSFER OF EXCESS FUNDS	
State: District:		

Full Name (Last, First, Middle Initial) B. Cunningham For Commonwealth's Attorney		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address PO Box 527		Amount of Each Disbursement this Period 250.00
City White Stone State VA Zip Code 22578	Purpose of Disbursement Non-Federal Political Contribution	
Candidate Name	Category/Type 011	Transaction ID : SB21-EX3267
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Non-Federal Political Contribution	
State: District:		

Full Name (Last, First, Middle Initial) C. Friends Of Willie Deutsch		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 8832 Middleburg Ct		Amount of Each Disbursement this Period 250.00
City Manassas State VA Zip Code 20109	Purpose of Disbursement Non-Federal Political Contribution	
Candidate Name	Category/Type 011	Transaction ID : SB21-EX3286
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Non-Federal Political Contribution	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30500.00
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 74 OF 74			
	<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)
Rob Wittman for Congress

Full Name (Last, First, Middle Initial) A. Stanley For Senate		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 13508 Booker T Washington Hwy		Amount of Each Disbursement this Period 500.00
City Moneta	State VA	Zip Code 24121
Purpose of Disbursement Non-Federal Political Contributiobn	Category/ Type 011	
Candidate Name		Transaction ID : SB21-EX3287
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Non-Federal Political Contributiobn
State: District:		

Full Name (Last, First, Middle Initial) B. Friends Of Nancy Dye		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 3535 Franklin Rd SW A-2		Amount of Each Disbursement this Period 500.00
City Roanoke	State VA	Zip Code 24014
Purpose of Disbursement Non-Federal Political Contribution	Category/ Type 011	
Candidate Name		Transaction ID : SB21-EX3288
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Non-Federal Political Contribution
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	31500.00