

**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

JOE KAUFMAN FOR CONGRESS

ADDRESS (number and street)

2645 EXECUTIVE PARK DRIVE STE 512



Check if different than previously reported. (ACC)

WESTON

FL

33331

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00501205

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

FL

20

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
10 / 01 / 2025

through

M M / D D / Y Y Y Y
12 / 31 / 2025

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 KAUFMAN, JOE, , ,

Signature of Treasurer

KAUFMAN, JOE, , ,

Date

M M / D D / Y Y Y Y
01 / 31 / 2026

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

	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))	22921.20	323386.59
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	22921.20	323386.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	4497.30
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	4497.30
8. Cash on Hand at Close of Reporting Period (from Line 27)	381678.30	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	50291.89	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	89862.53	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2025

To:

M M / D D / Y Y Y Y
12 / 31 / 2025**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).....

8490.00

149342.00

(ii) Unitemized

14431.20

174044.59

(iii) TOTAL of contributions
from individuals ▶

22921.20

323386.59

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

22921.20

323386.59

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

22921.20

323386.59

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	4497.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	4497.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	358757.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22921.20
25. SUBTOTAL (add Line 23 and Line 24).....	381678.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	381678.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 54

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

ABBOTT, ROGER, S, MR,

A.

Mailing Address 270 N HIGH POINT BLVD APT D

City

BOYNTON BEACH

State

FL

Zip Code

33435

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : SA11AI.72527

Amount of Each Receipt this Period

100.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

ARKO, ELIZABETH, M, MISS,

Mailing Address 272 CABRILLO ST APT A

City

COSTA MESA

State

CA

Zip Code

92627

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

Transaction ID : SA11AI.72780

Amount of Each Receipt this Period

250.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

BAILES, LARRY, , MR,

Mailing Address 1621 COLONY RD

City

PASADENA

State

MD

Zip Code

21122

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	2	5

Transaction ID : SA11AI.72556

Amount of Each Receipt this Period

100.00



Memo Item

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

450.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

BENNETT, HOWARD, , ,

A.

Mailing Address PO BOX 93

City

MILL CREEK

State

WV

Zip Code

26280

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 20 2025

Transaction ID : SA11AI.73005

Amount of Each Receipt this Period

70.00



Memo Item

Full Name (Last, First, Middle Initial)

BENNETT, HOWARD, , ,

B.

Mailing Address PO BOX 93

City

MILL CREEK

State

WV

Zip Code

26280

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.73002

Amount of Each Receipt this Period

75.00



Memo Item

Full Name (Last, First, Middle Initial)

BENNETT, HOWARD, , ,

C.

Mailing Address PO BOX 93

City

MILL CREEK

State

WV

Zip Code

26280

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2025

Transaction ID : SA11AI.73003

Amount of Each Receipt this Period

70.00



Memo Item

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

215.00

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

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

BERNARDO, ASHLEY, , MS,

A.

Mailing Address 8 BRIDLE CT

City

OYSTER BAY

State

NY

Zip Code

11771

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.73008

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BERNAU, PHYLLIS, , MRS,

B.

Mailing Address 1169 W SLEEPY HOLLOW DR

City

NIXA

State

MO

Zip Code

65714

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 17 2025

Transaction ID : SA11AI.72496

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , ,

C.

Mailing Address PO BOX 207

City

CHINA

State

TX

Zip Code

77613

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 20 2025

Transaction ID : SA11AI.73015

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

525.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRITTON, BEATRICE, W, MRS,

A.

Mailing Address PO BOX 2327

City

SOUTH HAMILTON

State

MA

Zip Code

01982

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 03 2025

Transaction ID : SA11AI.72619

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUSSEY, ANN, H, MRS,

B.

Mailing Address 5322 INDIGO ST

City

HOUSTON

State

TX

Zip Code

77096

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RETIRED CPA/ I T EXEC

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : SA11AI.72502

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUTLER, MARIE, , MS,

C.

Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.72988

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

400.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

A.

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2025

Transaction ID : SA11AI.73037

Amount of Each Receipt this Period

70.00



Memo Item

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

B.

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.73036

Amount of Each Receipt this Period

70.00



Memo Item

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

C.

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72674

Amount of Each Receipt this Period

40.00



Memo Item

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

180.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

A.

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : SA11AI.72673

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, , ,

B.

Mailing Address 8961 LAKE DRIVE #306
#306

City

CAPE CANAVERAL

State

FL

Zip Code

32920

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2025

Transaction ID : SA11AI.72538

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FARMER, THANE, S, DR,

C.

Mailing Address 11197 WEATHERSTONE DR

City

WAYNESBORO

State

PA

Zip Code

17268

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72541

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

162.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

FARMER, THANE, S, DR,

A.

Mailing Address 11197 WEATHERSTONE DR

City

WAYNESBORO

State

PA

Zip Code

17268

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

222.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
1	0		2	0		2	0	2	5

Transaction ID : SA11AI.72539

Amount of Each Receipt this Period

12.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

FORTE, NICHOLAS, , ,

Mailing Address 53 E SADDLE RIVER RD

City

SADDLE RIVER

State

NJ

Zip Code

07458

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
1	0		1	0		2	0	2	5

Transaction ID : SA11AI.72645

Amount of Each Receipt this Period

100.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

FULL, NORMA, L, MRS,

Mailing Address 7017 SELBY RD

City

ATHENS

State

OH

Zip Code

45701

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
1	0		3	0		2	0	2	5

Transaction ID : SA11AI.72773

Amount of Each Receipt this Period

85.00



Memo Item

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

197.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 54

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

A. Mailing Address 4840 THUNDERBIRD DR APT 383

City

BOULDER

State

CO

Zip Code

80303

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED VET

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2025			

Transaction ID : SA11AI.72520

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

B. Mailing Address 4840 THUNDERBIRD DR APT 383

City

BOULDER

State

CO

Zip Code

80303

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED VET

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2025			

Transaction ID : SA11AI.72521

Amount of Each Receipt this Period

200.00



Memo Item

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

C. Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

760.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2025			

Transaction ID : SA11AI.72657

Amount of Each Receipt this Period

100.00



Memo Item

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

550.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

A.

Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.72658

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUMPHRIS, THOMAS, L, MR,

B.

Mailing Address 3311 PIN OAK PKWY

City

ROCKFORD

State

IL

Zip Code

61101

FEC ID number of contributing
federal political committee.

C

Name of Employer

MANUFACTURER'S REP

Occupation

MANUFACTURER'S REP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 06 2025

Transaction ID : SA11AI.72491

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IONATA, FRED, , MR,

C.

Mailing Address 1782 ROYAL OAK PL W

City

DUNEDIN

State

FL

Zip Code

34698

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.72546

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

IONATA, FRED, , MR,

A.

Mailing Address 1782 ROYAL OAK PL W

City

DUNEDIN

State

FL

Zip Code

34698

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : SA11AI.72545

Amount of Each Receipt this Period

100.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

KAPLOWITZ, NEIL, , MR,

Mailing Address 100 RIVERSEDGE DR UNIT 113

City

ATLANTA

State

GA

Zip Code

30339

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	5

Transaction ID : SA11AI.72806

Amount of Each Receipt this Period

36.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

KAUFMANN, MORRIS, , MR,

Mailing Address 4741 COLLINOS WAY

City

OCEANSIDE

State

CA

Zip Code

92056

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNEMPLOYED

Occupation

ENGINEER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

Transaction ID : SA11AI.72532

Amount of Each Receipt this Period

100.00



Memo Item

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

236.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

KELLER, ARLEEN, FOX, MS,

A.

Mailing Address 8369 LYNNEHAVEN DR

City

CINCINNATI

State

OH

Zip Code

45236

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED RN ADM

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	2	5

Transaction ID : SA11AI.72864

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KENNER, LYLE, , MR,

B.

Mailing Address PO BOX 579

City

LINTON

State

ND

Zip Code

58552

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHERN VETERINARY SERV

Occupation

VETERINARIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

Transaction ID : SA11AI.72716

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, MARY, SUSAN, MS,

C.

Mailing Address 100 SAND BUNKER CT

City

FRONT ROYAL

State

VA

Zip Code

22630

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

Transaction ID : SA11AI.72630

Amount of Each Receipt this Period

150.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

KINZEL, CHRISTEL, , MISS,

A.

Mailing Address 100 HOMEWOOD WAY APT 126

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

Transaction ID : SA11AI.72833

Amount of Each Receipt this Period

35.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

KUROWSKI, KATHLEEN, A, MRS,

Mailing Address 150 COOK HILL RD APT 1306

City

CHESHIRE

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	5

Transaction ID : SA11AI.72805

Amount of Each Receipt this Period

50.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

KUROWSKI, KATHLEEN, A, MRS,

Mailing Address 150 COOK HILL RD APT 1306

City

CHESHIRE

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : SA11AI.72804

Amount of Each Receipt this Period

35.00



Memo Item

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

120.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEE, ROBERT, , MR,

A.

Mailing Address 6 S ROW ST

City

CHELMSFORD

State

MA

Zip Code

01824

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 14 2025

Transaction ID : SA11AI.72944

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LIPPERT, DAVID, J, MR,

B.

Mailing Address 7211 EL FUERTE ST

City

CARLSBAD

State

CA

Zip Code

92009

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.72839

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LYON, YVONNE, M, MRS,

C.

Mailing Address 3025 LEPRECHAUN LN

City

PALM HARBOR

State

FL

Zip Code

34683

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.72387

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

115.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

MONDIN, PRIMO, J, ,

A.

Mailing Address 101 KING CIR

City

LOUISBURG

State

NC

Zip Code

27549

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	2	5

Transaction ID : SA11AI.73034

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORROW, CAROLYN, , ,

B.

Mailing Address 56 GROVE ST

City

NEW LONDON

State

OH

Zip Code

44851

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	2	5

Transaction ID : SA11AI.72906

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORTON, PEGGY, , MS,

C.

Mailing Address 486 LAMBERT DR

City

BRADFORD

State

PA

Zip Code

16701

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

Transaction ID : SA11AI.72933

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

190.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, S, ,

A.

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

865.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 23 2025

Transaction ID : SA11AI.72821

Amount of Each Receipt this Period

190.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, S, ,

B.

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.72820

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OTTUM, DAVID, A, MR,

C.

Mailing Address N2532 COUNTY ROAD C

City

DARIEN

State

WI

Zip Code

53114

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 22 2025

Transaction ID : SA11AI.72797

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

465.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

PIKUS, YELENA, , MRS,

A.

Mailing Address 2525 BATCHELDER ST APT 4A

City

BROOKLYN

State

NY

Zip Code

11235

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2025

Transaction ID : SA11AI.72798

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PUTZAN, CONRAD, S, MR,

B.

Mailing Address 1245 BEACH RD

City

RIVIERA BEACH

State

FL

Zip Code

33404

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.72523

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RANDAZZO, GASPARE, , ,

C.

Mailing Address 8587 67TH AVE APT 2

City

REGO PARK

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72743

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

105.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

RANDAZZO, GASPARE, , ,

A. Mailing Address 8587 67TH AVE APT 2

City

REGO PARK

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 23 2025

Transaction ID : SA11AI.72746

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RANDAZZO, GASPARE, , ,

B. Mailing Address 8587 67TH AVE APT 2

City

REGO PARK

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 23 2025

Transaction ID : SA11AI.72747

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RANDAZZO, GASPARE, , ,

C. Mailing Address 8587 67TH AVE APT 2

City

REGO PARK

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : SA11AI.72745

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

REINHARD, Donald, G, ,

A.

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 24 2025

Transaction ID : SA11AI.72465

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPSOLD, CORINNE, A, ,

B.

Mailing Address 674 SE 38TH DR

City

GRESHAM

State

OR

Zip Code

97080

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2025

Transaction ID : SA11AI.72443

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROOD, JOHN, W, MR,

C.

Mailing Address 1384 STONEHOLLOW DR APT 1

City

KINGWOOD

State

TX

Zip Code

77339

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN W ROOD CPA & ASSOC

Occupation

CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 20 2025

Transaction ID : SA11AI.72722

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

600.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

RUDD, STANLEY, ROCKHILL, MR,

A. Mailing Address 2680 TRILLIUM RDG UNIT 3118

City

THE VILLAGES

State

FL

Zip Code

32163

FEC ID number of contributing
federal political committee.

C

Name of Employer

FL DEPT OF EDUCATION

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 29 2025

Transaction ID : SA11AI.72575

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

B. Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 06 2025

Transaction ID : SA11AI.72936

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

C. Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.72937

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1050.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

SLINDE, GARY, A, ,

A.

Mailing Address 3120 LOCKER RD SE

City

PORT ORCHARD

State

WA

Zip Code

98366

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 31 2025

Transaction ID : SA11AI.72834

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAMM, JOHN, R, MR,

B.

Mailing Address 244 BAVARIAN CT

City

GREEN BAY

State

WI

Zip Code

54302

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2025

Transaction ID : SA11AI.72754

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STERLING, MARGARET, JEAN, MRS,

C.

Mailing Address PO BOX 1866

City

GREENEVILLE

State

TN

Zip Code

37744

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED RN

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.73025

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

335.00

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

Use separate schedule(s)
for each category of the
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

STERLING, MARGARET, JEAN, MRS,

A.

Mailing Address PO BOX 1866

City

GREENEVILLE

State

TN

Zip Code

37744

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED RN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 24 2025

Transaction ID : SA11AI.73026

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

B.

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 15 2025

Transaction ID : SA11AI.72413

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

C.

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.72414

Amount of Each Receipt this Period

50.00



Memo Item

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

350.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

SUNKLER, MARGARET, L, MRS,

A.

Mailing Address 88794 SHERRILL LN

City

BANDON

State

OR

Zip Code

97411

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	5

Transaction ID : SA11AI.72964

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THORNTON, ROY, E, MR,

B.

Mailing Address 2921 BELLA VISTA DR

City

MIDWEST CITY

State

OK

Zip Code

73110

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	5

Transaction ID : SA11AI.72444

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UY, JOAQUIN, , MR & MRS,

C.

Mailing Address 5485 PINNACLE CT

City

ANN ARBOR

State

MI

Zip Code

48108

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : SA11AI.72397

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

170.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

VELIKY, DONALD, J, MR,

A.

Mailing Address 5535 OAK LN

City

FRUITLAND PK

State

FL

Zip Code

34731

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROWARD S D

Occupation

RETIRED DEP SHERIFF

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2025

Transaction ID : SA11AI.72620

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

WATTS, ELAINE, C, ,

B.

Mailing Address 165 NOVA CIR

City

ALPINE

State

AL

Zip Code

35014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2025

Transaction ID : SA11AI.72739

Amount of Each Receipt this Period

35.00



Memo Item

Full Name (Last, First, Middle Initial)

WATTS, ELAINE, C, ,

C.

Mailing Address 165 NOVA CIR

City

ALPINE

State

AL

Zip Code

35014

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72740

Amount of Each Receipt this Period

35.00



Memo Item

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

120.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WATTS, ELAINE, C, ,

A.

Mailing Address 165 NOVA CIR

City

ALPINE

State

AL

Zip Code

35014

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : SA11AI.72738

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHEATLEY, BRADY, L, MR,

B.

Mailing Address 6758 SW COUNTY ROAD 1007

City

RICH HILL

State

MO

Zip Code

64779

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.73007

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, LESTER, E, MR,

C.

Mailing Address 14 MOUNT RAINIER LN

City

MADISON

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2025

Transaction ID : SA11AI.73014

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

120.00

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHITE, LESTER, E, MR,

A.

Mailing Address 14 MOUNT RAINIER LN

City

MADISON

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.73013

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, LUELLA, M, MRS,

B.

Mailing Address 1603 113TH ST S

City

TACOMA

State

WA

Zip Code

98444

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 07 2025

Transaction ID : SA11AI.72689

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, LUELLA, M, MRS,

C.

Mailing Address 1603 113TH ST S

City

TACOMA

State

WA

Zip Code

98444

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 24 2025

Transaction ID : SA11AI.72690

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

125.00

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

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

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

A.

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.72791

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

B.

Mailing Address 200 W CROSS ST

City

DONGOLA

State

IL

Zip Code

62926

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 06 2025

Transaction ID : SA11AI.72922

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

C.

Mailing Address 200 W CROSS ST

City

DONGOLA

State

IL

Zip Code

62926

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 29 2025

Transaction ID : SA11AI.72921

Amount of Each Receipt this Period

100.00



Memo Item

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

250.00

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

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

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for each category of the
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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WIMER, WILLIAM, R, MR,

A.

Mailing Address 3531 MANGROVE AVE APT F

City

NORFOLK

State

VA

Zip Code

23502

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.72871

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WRIGHT, JOAN, B, MRS,

B.

Mailing Address 408 DAROCO AVE

City

CORAL GABLES

State

FL

Zip Code

33146

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72686

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WRIGHT, JOAN, B, MRS,

C.

Mailing Address 408 DAROCO AVE

City

CORAL GABLES

State

FL

Zip Code

33146

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 28 2025

Transaction ID : SA11AI.72687

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

175.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

WRIGHT, ROSE, MARY, MS,

A.

Mailing Address 115 RESERVATION RD

City

CLOQUET

State

MN

Zip Code

55720

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2025

Transaction ID : SA11AI.72881

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

YU, JEAN, , ,

B.

Mailing Address 24526 62ND AVE

City

LITTLE NECK

State

NY

Zip Code

11362

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2025

Transaction ID : SA11AI.72941

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

85.00

8490.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 33 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63372

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

BASE CONNECT, INC.

Mailing Address

1155 - 15TH ST, NW
SUITE 410

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

20235.44

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20235.44

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20235.44

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63375

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

CENTURY DATA SYSTEMS CORP

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1155 - 15TH STREET, NW

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6552.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6552.89

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6552.89

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 54

FOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63377

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

DIRECT MAIL PROCESSORS, INC.

Mailing Address

1150 CONRAD COURT

City

HAGERSTOWN

State

MD

ZIP Code

21740

☐ Personal Funds of the Candidate

Original Amount of Loan

102.55

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

102.55

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

102.55

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 36 OF 54

FOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63373

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

INTEGRAM

Mailing Address

22695 Commerce Center Court

City

Dulles

State

VA

ZIP Code

20166

☐ Personal Funds of the Candidate

Original Amount of Loan

10210.45

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10210.45

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10210.45

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 37 OF 54

FOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63376

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

LEGACY LISTS, INC. - BROKERAGE

Mailing Address

1155 - 15TH STREET, NW
SUITE 410

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6327.81

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6327.81

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6327.81

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 38 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63374

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

LEGACY LISTS, INC. - MANAGEMENT

Mailing Address

1155 15th St NW

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

City

Washington

State

FL

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6769.75

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6769.75

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6769.75

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 54

FOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63378

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

SIMPKINS ESCROW LLC

Mailing Address

29243 St Just Dr

City

UNIONVILLE

State

VA

ZIP Code

22567

☐ Personal Funds of the Candidate

Original Amount of Loan

93.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

93.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

93.00

TOTALS This Period (last page in this line only).....▶

50291.89

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 40 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.48978

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

JOE KAUFMAN FOR CONGRESS

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 24 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 41 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.48979

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

JOE KAUFMAN FOR CONGRESS

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

11000.00

Cumulative Payment To Date

9500.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 30 / 2014

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 42 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5512

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE
STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

3248.21

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3248.21

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 01 / 2011

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3248.21

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9126

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE
STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

3800.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2011

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.20680

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 20 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 45 OF 54

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22542

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 05 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

500.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22543

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 13 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22544

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 16 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.26611

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

3200.00

Cumulative Payment To Date

823.50

Balance Outstanding at Close of This Period

2376.50

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 15 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2376.50

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.50920

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 / 20 / 2014M M / D D / Y Y Y Y
Upon DemandY Y Y Y / Y Y Y Y
0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 50 OF 54

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.50921

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 20 / 2014M M / D D / Y Y Y Y
Upon DemandY Y Y Y / Y Y Y Y
0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 51 OF 54

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.58526

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Kaufman, Joseph, , ,

Mailing Address

8708 NW 82 ST.

City

Tamarac

State

FL

ZIP Code

33321

☒ Personal Funds of the Candidate

Original Amount of Loan

5745.93

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5745.93

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 05 / 2015

M M / D D / Y Y Y Y

on demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5745.93

TOTALS This Period (last page in this line only).....▶

39570.64

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 52 OF 54

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BASE CONNECT, INC.

Nature of Debt (Purpose):

Direct Mail Creative Fees

Mailing Address 1155 15th St NW
STE 410City
WashingtonState
DCZip Code
20005

Outstanding Balance Beginning This Period

20235.44

Transaction ID : SD10.33907

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20235.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CENTURY DATA SYSTEMS CORP

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 1155 - 15TH STREET, NW

City
WASHINGTONState
DCZip Code
20005

Outstanding Balance Beginning This Period

6552.89

Transaction ID : SD10.33908

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6552.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DIRECT MAIL PROCESSORS, INC.

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 2976 Penwick Lane

City
DunkirkState
MDZip Code
20754

Outstanding Balance Beginning This Period

102.55

Transaction ID : SD10.33909

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

102.55

1) **SUBTOTALS** This Period This Page (optional) ▶

26890.88

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 53 OF 54

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTEGRAM

Nature of Debt (Purpose):

Direct Mail Program Printing & Mailshop

Mailing Address 22695 Commerce Center Court

City

Dulles

State

VA

Zip Code

20166

Outstanding Balance Beginning This Period

10210.45

Transaction ID : SD10.33910

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10210.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LISTS, INC. - BROKERAGE

Nature of Debt (Purpose):

Direct Mail List Rental

Mailing Address 1155 - 15TH STREET, NW
SUITE 410

City

WASHINGTON

State

DC

Zip Code

20005

Outstanding Balance Beginning This Period

6327.81

Transaction ID : SD10.33911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6327.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LISTS, INC. - MANAGEMENT

Nature of Debt (Purpose):

Direct Mail List Management

Mailing Address 1155 15th St NW

City

Washington

State

FL

Zip Code

20005

Outstanding Balance Beginning This Period

6769.75

Transaction ID : SD10.33912

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6769.75

1) **SUBTOTALS** This Period This Page (optional)

23308.01

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 OF 54

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

JOE KAUFMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SIMPKINS ESCROW LLC

Nature of Debt (Purpose):

Indirect Prog Exp Caging & Escrow

Mailing Address 29243 St Just Dr

City

UNIONVILLE

State

VA

Zip Code

22567

Outstanding Balance Beginning This Period

93.00

Transaction ID : SD10.33913

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

93.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

93.00

2) **TOTALS** This Period (last page this line number only)

50291.89

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

39570.64

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

89862.53