

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Longan For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	204619.71	506432.75
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	204619.71	506432.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	437377.74	667636.06
(b) Total Offsets to Operating Expenditures (from Line 14).....		624.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	437377.74	667011.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	135796.42	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	451663.11	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Lonegan For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	84711.68	190667.68
(ii) Unitemized.....	116158.03	307015.07
(iii) TOTAL of contributions from individuals ▶	200869.71	497682.75
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	3750	3750
(d) The Candidate.....		5000
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	204619.71	506432.75
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	196500	296500
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	196500	296500
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
		624.73
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	401119.71	803557.48

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	437377.74	667636.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	437377.74	667636.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	172054.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	401119.71
25. SUBTOTAL (add Line 23 and Line 24).....	573174.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	437377.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	135796.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard A Akers

Mailing Address 476 Joralemon St Apt B-1

City State Zip Code
Belleville NJ 07109-1866

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

Name of Employer Occupation
Essex Co Golf Course Range Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68969

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
MISS Carol H Albrecht

Mailing Address 10 Wyckoff Way

City State Zip Code
Chester NJ 07930-2477

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69700

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mrs Janet Allison

Mailing Address 5825 SW 28th St

City State Zip Code
Topeka KS 66614-2418

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

Name of Employer Occupation
Topeka Lutheran School Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
276

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68717

Amount of Each Receipt this Period
53

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

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

253.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Mrs Janet Allison
 Full Name (Last, First, Middle Initial)
 Mailing Address 5825 SW 28th St
 City Topeka State KS Zip Code 66614-2418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Topeka Lutheran School Occupation Teacher
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **311**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : SA11Ai-CN70261
 Amount of Each Receipt this Period
 35

B. Ms Karen Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 W 2nd Ave
 City Saint John State KS Zip Code 67576-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **245**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : SA11Ai-CN69129
 Amount of Each Receipt this Period
 35

C. Ms Karen Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 W 2nd Ave
 City Saint John State KS Zip Code 67576-1905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **280**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2014
Transaction ID : SA11Ai-CN69130
 Amount of Each Receipt this Period
 35

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

105.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Karen Anderson

Mailing Address 315 W 2nd Ave

City Saint John State KS Zip Code 67576-1905

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **430**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69724

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Ms Karen Anderson

Mailing Address 315 W 2nd Ave

City Saint John State KS Zip Code 67576-1905

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **480**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN71587

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Mr. Alfred A Angelo

Mailing Address 340 N Ave E Ste 2

City Cranford State NJ Zip Code 07016-2461

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

Name of Employer Requested Occupation Requested
 Angelo O'Brien Accountants/Auditors CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68113

Amount of Each Receipt this Period
2600

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Chris Armbrust

Mailing Address 27w320 Roosevelt Rd

City Winfield State IL Zip Code 60190-1542

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

Name of Employer SELF Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN70133

Amount of Each Receipt this Period
40

B. Full Name (Last, First, Middle Initial)
Mrs Bonnie Auld

Mailing Address 4019 Calle Sonora Este Unit B

City Laguna Woods State CA Zip Code 92637-3208

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69820

Amount of Each Receipt this Period
30

C. Full Name (Last, First, Middle Initial)
Mrs Bonnie Auld

Mailing Address 4019 Calle Sonora Este Unit B

City Laguna Woods State CA Zip Code 92637-3208

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN71280

Amount of Each Receipt this Period
35

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

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

105.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Judith Moncrieff Baldwin

Mailing Address 1130 Park Ave

City State Zip Code
New York NY 10128-1255

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

Name of Employer Occupation
Self-Employed Entrepreneur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68405

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms Nancy L Barnhart

Mailing Address 7370 Walsh Rd

City State Zip Code
Millington TN 38053-6020

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71701

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
MR Ray R Barrett JR

Mailing Address Hc 34 Box 3

City State Zip Code
Midkiff TX 79755

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

Name of Employer Occupation
SELF FARMER RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68775

Amount of Each Receipt this Period
300

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Ray R Barrett JR

Mailing Address Hc 34 Box 3

City Midkiff State TX Zip Code 79755

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

Name of Employer SELF Occupation FARMER RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN71009

Amount of Each Receipt this Period
 300

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

Mailing Address 133 Carlton Ave

City Marlton State NJ Zip Code 08053

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11Ai-CN68161

Amount of Each Receipt this Period
 125

C. Full Name (Last, First, Middle Initial)
Mr. Matthew V Basile

Mailing Address 23 Fulton St

City Bloomfield State NJ Zip Code 07003

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

Name of Employer SELF Occupation INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1025**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11Ai-CN68158

Amount of Each Receipt this Period
 500

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

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

925.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert Belansen SR

Mailing Address 1057 Beach Ave

City Cape May State NJ Zip Code 08204-1613

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN71657

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. James L Bellis Jr

Mailing Address 1681 Lamington Rd

City Bedminster State NJ Zip Code 07921

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

Name of Employer Tree Tech Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11Ai-CN68204

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Ms Jane Beneke

Mailing Address 4201 Armstrong Pkwy

City Dallas State TX Zip Code 75205-3715

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11Ai-CN71382

Amount of Each Receipt this Period
300

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

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Carol Benner

Mailing Address 711 Maple Leaf Ln

City Moorestown State NJ Zip Code 08057-1841

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : SA11Ai-CN69216

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms Carol Benner

Mailing Address 711 Maple Leaf Ln

City Moorestown State NJ Zip Code 08057-1841

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70380

Amount of Each Receipt this Period
1600

C. Full Name (Last, First, Middle Initial)
Mrs. Doris Berenzweig

Mailing Address 452 Meer Ave

City Wyckoff State NJ Zip Code 07481-1805

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

Name of Employer None Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68396

Amount of Each Receipt this Period
1000

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr James W Blatchford Jr.

Mailing Address 611 Andover Rd

City State Zip Code
Newtown Square PA 19073-1403

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11Ai-CN68637

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Bonanno

Mailing Address 62 Hook Mountain Rd

City State Zip Code
Montville NJ 07045

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

Name of Employer Occupation
West Essex Mgmt Co Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN68227

Amount of Each Receipt this Period
2500

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

Mailing Address PO Box 1147

City State Zip Code
Tallahassee FL 32302-1147

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

Name of Employer Occupation
NONE RETIRED ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN70912

Amount of Each Receipt this Period
1000

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

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

3800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Joseph L Branciforte

Mailing Address 2 Collette Dr

City Ramsey State NJ Zip Code 07446

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

Name of Employer Bergen Catholic HS Occupation Development Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11Ai-CN68394

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
MR John L Brandt

Mailing Address 2129 12th Ave E

City Hibbing State MN Zip Code 55746-1836

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11Ai-CN71588

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Ms Paula Brigham

Mailing Address 1222 Monroe Ave

City Reading State PA Zip Code 19610-2432

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11Ai-CN70344

Amount of Each Receipt this Period
 200

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Susan Brunoff

Mailing Address 334 W Cedar St

City State Zip Code
New Holland PA 17557-1202

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71661

Amount of Each Receipt this Period
70

B. Full Name (Last, First, Middle Initial)
MS Elizabeth Bryden

Mailing Address 1 W 67th St Apt 611

City State Zip Code
New York NY 10023-6200

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
923

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68936

Amount of Each Receipt this Period
105

C. Full Name (Last, First, Middle Initial)
MS Elizabeth Bryden

Mailing Address 1 W 67th St Apt 611

City State Zip Code
New York NY 10023-6200

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1128

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71703

Amount of Each Receipt this Period
205

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

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

380.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Vera M Burchett

Mailing Address 1819 Birchwood St

City Aurora State NE Zip Code 68818-1410

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **390**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69852

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Mrs Betsy Burgett

Mailing Address 1628 Meadow View Dr

City Medford State OR Zip Code 97504-4507

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11Ai-CN68612

Amount of Each Receipt this Period
500

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

Mailing Address 2015 Creek Rd

City Hainesport State NJ Zip Code 08036

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

Name of Employer retired Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11Ai-CN68269

Amount of Each Receipt this Period
250

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 17 OF 161
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Henry P Butehorn

Mailing Address 791 Port Monmouth Rd

City State Zip Code
Port Monmouth NJ 07758

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

Name of Employer Occupation
UNISYS CORP TRANSPORTATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68128

Amount of Each Receipt this Period
250

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

Mailing Address 1005 Augusta Ave

City State Zip Code
Wausau WI 54403-3340

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN70915

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr Stephen Byrne

Mailing Address 633 E Main St Unit B1

City State Zip Code
Moorestown NJ 08057-3028

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

Name of Employer Occupation
RENZI FAMILY MEDICINE LLC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68125

Amount of Each Receipt this Period
250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Sue M Cannon

Mailing Address 6420 W Lakeridge Rd

City Lakewood State CO Zip Code 80227-3909

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68766

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Ms Sue M Cannon

Mailing Address 6420 W Lakeridge Rd

City Lakewood State CO Zip Code 80227-3909

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11Ai-CN70064

Amount of Each Receipt this Period
1600

C. Full Name (Last, First, Middle Initial)
Ms Joyce Caraway

Mailing Address 123 Erin Dr

City Kerrville State TX Zip Code 78028-4826

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11Ai-CN71385

Amount of Each Receipt this Period
50

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

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

2650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Mrs Rosalie Chambers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Shetland Rd
 City Florham Park State NJ Zip Code 07932-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : SA11Ai-CN70696
 Amount of Each Receipt this Period
 25

B. Ms Dicey S Childers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8517 Joy Rd
 City Blountsville State AL Zip Code 35031-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Owner Occupation Christian Bookstore
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **560**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014
Transaction ID : SA11Ai-CN69224
 Amount of Each Receipt this Period
 100

C. MR William R Clayton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1514 Silo Ct
 City Manasquan State NJ Zip Code 08736-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014
Transaction ID : SA11Ai-CN68221
 Amount of Each Receipt this Period
 100

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

225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR William R Clayton

Mailing Address 1514 Silo Ct

City Manasquan State NJ Zip Code 08736-2225

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71486

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
MR Martin Collins

Mailing Address 148 Stone Manor Dr

City Somerset State NJ Zip Code 08873-6028

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Ai-CN69564

Amount of Each Receipt this Period
100

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

Mailing Address 7341 E 42nd St

City Tucson State AZ Zip Code 85730-1723

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68769

Amount of Each Receipt this Period
250

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 7341 E 42nd St

City Tucson State AZ Zip Code 85730-1723

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69832

Amount of Each Receipt this Period
150

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

Mailing Address 7341 E 42nd St

City Tucson State AZ Zip Code 85730-1723

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1775**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71016

Amount of Each Receipt this Period
375

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

Mailing Address PO Box 807

City Woodbury State NJ Zip Code 08096

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

Name of Employer Cornell & Co Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN68149

Amount of Each Receipt this Period
2600

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

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

3125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Hilary H Cunniff

Mailing Address 12 Eglantine Ave

City Pennington State NJ Zip Code 08534-2307

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN68230

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marlton State NJ Zip Code 08053-5534

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1075**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11Ai-CN68085

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marlton State NJ Zip Code 08053-5534

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1475**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68120

Amount of Each Receipt this Period
400

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marlton State NJ Zip Code 08053-5534

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1533**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68217

Amount of Each Receipt this Period
58

B. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marlton State NJ Zip Code 08053-5534

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1593**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN68256

Amount of Each Receipt this Period
60

C. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marlton State NJ Zip Code 08053-5534

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1633**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN68290

Amount of Each Receipt this Period
40

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

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

158.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Georgette Denlinger

Mailing Address 10 Geranium Dr

City Marilton State NJ Zip Code 08053-5534

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1733**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68403

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Ms Frances S Diplacidi

Mailing Address 1530 Palisade Ave Apt 6s

City Fort Lee State NJ Zip Code 07024-5402

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

Name of Employer None Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68796

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. H Renwick R Dunlap Jr

Mailing Address 989 Shooting Box Rd

City King William State VA Zip Code 23086-2003

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68134

Amount of Each Receipt this Period
50

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Leonard Dunne

Mailing Address **PO Box 560**

City **Andover** State **NJ** Zip Code **07821-0560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69839

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Mrs Sylvia Duryee

Mailing Address **1115 41st Ave E**

City **Seattle** State **WA** Zip Code **98112-4405**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN69037

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Mr Frederick Eichler Jr.

Mailing Address **410 Clinton Ave**

City **Northvale** State **NJ** Zip Code **07647-1411**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69774

Amount of Each Receipt this Period
75

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

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

475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Roland C Ellis

Mailing Address 320 Wisteria Ave

City Reading State PA Zip Code 19606-3472

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **237**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN71120

Amount of Each Receipt this Period
 76

B. Full Name (Last, First, Middle Initial)
MR Roland C Ellis

Mailing Address 320 Wisteria Ave

City Reading State PA Zip Code 19606-3472

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **337**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN71715

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Ms Ruth Ellison

Mailing Address 5120 Parkside Dr

City N Charleston State SC Zip Code 29405-4104

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014

Transaction ID : SA11Ai-CN69589

Amount of Each Receipt this Period
 100

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

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

276.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Ruth Ellison

Mailing Address 5120 Parkside Dr

City State Zip Code
N Charleston SC 29405-4104

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71538

Amount of Each Receipt this Period
70

B. Full Name (Last, First, Middle Initial)
Ms Eleanor L Estes

Mailing Address 65 Gaston Rd

City State Zip Code
Morristown NJ 07960-3418

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Ai-CN69636

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Henry W Finger

Mailing Address 102 Marbury Ct

City State Zip Code
Medford NJ 08055-8623

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

Name of Employer Occupation
Self DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN68155

Amount of Each Receipt this Period
100

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

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

670.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Henry W Finger

Mailing Address 102 Marbury Ct

City Medford State NJ Zip Code 08055-8623

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

Name of Employer Self Occupation DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN68345

Amount of Each Receipt this Period
 100

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

Mailing Address PO Box 1607

City Medford State NJ Zip Code 08055

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

Name of Employer Arthur J Finkelstein & Assoc. Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN68470

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Ms Jane G Flynn

Mailing Address 1840 Tice Creek Dr Apt 2105

City Walnut Creek State CA Zip Code 94595-2458

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : SA11Ai-CN69345

Amount of Each Receipt this Period
 150

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Malcolm S Forbes Jr

Mailing Address 1335 Burnt Mills Rd

City Bedminster State NJ Zip Code 07921

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

Name of Employer Forbes Management Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN68389

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
MS Victoria I Ford

Mailing Address 4303 Forest Park Rd

City Jacksonville State FL Zip Code 32210-6027

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN70920

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Robert A Franks

Mailing Address 21 Bonnell La

City Randolph State NJ Zip Code 07869

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11Ai-CN68211

Amount of Each Receipt this Period
150

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Susan Frazier

Mailing Address 15 Magee Ave

City Lavallette State NJ Zip Code 08735

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11Ai-CN68223

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Freeman

Mailing Address 2124 Wedgemont Pl

City Bakersfield State CA Zip Code 93311

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

Name of Employer Castle & Cooke Occupation Land Development & Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11Ai-CN68393

Amount of Each Receipt this Period
1200

C. Full Name (Last, First, Middle Initial)
Mr. Jack A Frohbieter

Mailing Address 34 Cranbury Neck Rd

City Cranbury State NJ Zip Code 08512

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

Name of Employer None Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11Ai-CN68090

Amount of Each Receipt this Period
250

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

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

4050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Catherine Fulton

Mailing Address 411 Mead Road

City Jackson State NJ Zip Code 08527

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **218**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11Ai-CN68278

Amount of Each Receipt this Period
 60

B. Full Name (Last, First, Middle Initial)
Mr Don Gabianelli

Mailing Address 47 Louise St

City Crossville State TN Zip Code 38555-5486

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **420**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11Ai-CN70325

Amount of Each Receipt this Period
 140

C. Full Name (Last, First, Middle Initial)
Mr Don Gabianelli

Mailing Address 47 Louise St

City Crossville State TN Zip Code 38555-5486

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **525**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11Ai-CN71495

Amount of Each Receipt this Period
 105

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

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

305.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Dr Gus A Galatianos

Mailing Address 1724 Parsons Blvd

City State Zip Code
Whitestone NY 11357-3041

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

Name of Employer Occupation
SELF EMPLOYED GALATIANOS PHD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71496

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
MRS Betty Gardner

Mailing Address 1572 Goodin Hollow Rd

City State Zip Code
Noel MO 64854-7235

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Ai-CN70827

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Mr Anthony J Gasparine

Mailing Address PO Box 685

City State Zip Code
Chester NJ 07930-0685

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

Name of Employer Occupation
SELF WELDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70489

Amount of Each Receipt this Period
200

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mrs Virginia L Gaylord

Mailing Address 430 N Vinedo Ave

City Pasadena State CA Zip Code 91107-2615

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **445**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN68225

Amount of Each Receipt this Period
295

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

Mailing Address 5526 Toyon Rd

City San Diego State CA Zip Code 92115-1020

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN71638

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mrs Julia Hanley

Mailing Address 50 E Stokes Rd

City Willingboro State NJ Zip Code 08046-2404

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **445**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68133

Amount of Each Receipt this Period
295

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

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

690.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 55 Overlook Dr

City Westfield State MA Zip Code 01085

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN71297

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mrs. Carole H Hare

Mailing Address 227 Fairview Ave

City Moorestown State NJ Zip Code 08057

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2014

Transaction ID : SA11Ai-CN67998

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mrs. Carole H Hare

Mailing Address 227 Fairview Ave

City Moorestown State NJ Zip Code 08057

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11Ai-CN68205

Amount of Each Receipt this Period
200

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Bobbye F Harris

Mailing Address 135 Windsor Dr

City Calhoun State GA Zip Code 30701-2055

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN70123

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Ms Joyce M Harrison

Mailing Address 4 Midland Ave

City Budd Lake State NJ Zip Code 07828-3412

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **413**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69772

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Ms Joyce M Harrison

Mailing Address 4 Midland Ave

City Budd Lake State NJ Zip Code 07828-3412

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **526**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70466

Amount of Each Receipt this Period
113

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

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

363.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Helen J Hauser

Mailing Address 7 Mead Ter

City: Glen Ridge State: NJ Zip Code: 07028

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **300**

Date of Receipt: **04 / 02 / 2014**

Transaction ID : SA11Ai-CN68536

Amount of Each Receipt this Period: **300**

B. Full Name (Last, First, Middle Initial)
Ms Helen J Hauser

Mailing Address 7 Mead Ter

City: Glen Ridge State: NJ Zip Code: 07028

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **05 / 12 / 2014**

Transaction ID : SA11Ai-CN71547

Amount of Each Receipt this Period: **200**

C. Full Name (Last, First, Middle Initial)
Mr Walter Hazard

Mailing Address 501 Rolling Hills Rd

City: Bridgewater State: NJ Zip Code: 08807-1931

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

Name of Employer: Atrion Corp Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **04 / 30 / 2014**

Transaction ID : SA11Ai-CN70375

Amount of Each Receipt this Period: **250**

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
DR Bernhard Heersink MD

Mailing Address 281 High St

City Newburyport State MA Zip Code 01950-3735

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2014

Transaction ID : SA11Ai-CN69676

Amount of Each Receipt this Period
 200

B. Full Name (Last, First, Middle Initial)
Mr. Orlando Hernandez

Mailing Address PO Box 9009

City North Bergen State NJ Zip Code 07047

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

Name of Employer Olandy Corp Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN68471

Amount of Each Receipt this Period
 1000

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

Mailing Address 70 Kendall Dr

City Ringwood State NJ Zip Code 07456-1841

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

Name of Employer The Shaw Group Occupation Nuclear Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11Ai-CN70155

Amount of Each Receipt this Period
 200

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Tatnall Lea Hillman

Mailing Address 504 W Bleeker St

City Aspen State CO Zip Code 81611-1228

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11Ai-CN71501

Amount of Each Receipt this Period
1000

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

Mailing Address 125 Quassaick Ave

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11Ai-CN70089

Amount of Each Receipt this Period
1000

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

Mailing Address 125 Quassaick Ave

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11Ai-CN71337

Amount of Each Receipt this Period
600

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Rose M Hotz

Mailing Address 806 S 6th St

City Hot Springs State SD Zip Code 57747-2841

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69836

Amount of Each Receipt this Period
90

B. Full Name (Last, First, Middle Initial)
Ms Rose M Hotz

Mailing Address 806 S 6th St

City Hot Springs State SD Zip Code 57747-2841

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71075

Amount of Each Receipt this Period
45

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

Mailing Address 620 Buermann Ave

City Toms River State NJ Zip Code 08753-7164

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

Name of Employer Information Requested Occupation Information Requested
RETIRED **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71502

Amount of Each Receipt this Period
20

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

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

155.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Jack Howley
Full Name (Last, First, Middle Initial)
Mailing Address 178 Rumson Rd
City Rumson State NJ Zip Code 77601049
FEC ID number of contributing federal political committee. **C**
Name of Employer Jack Howley Financial Group Occupation Executive
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2014
Transaction ID : SA11Ai-CN68461
Amount of Each Receipt this Period
1000

B. Mrs Gloria Huang
Full Name (Last, First, Middle Initial)
Mailing Address 77 Ellsworth Ter
City Glen Rock State NJ Zip Code 07452-3705
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **350**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2014
Transaction ID : SA11Ai-CN69220
Amount of Each Receipt this Period
150

C. Mrs Sarah B Hubbard
Full Name (Last, First, Middle Initial)
Mailing Address 3375 Forest Hill Rd
City Jackson State MS Zip Code 39212-3814
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **825**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2014
Transaction ID : SA11Ai-CN70603
Amount of Each Receipt this Period
825

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

1975.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Miss Katie Huffaker

Mailing Address 8958 N Leonard St

City Portland State OR Zip Code 97203-3027

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68783

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Mr. George V Humphris

Mailing Address 2 Parkway Dr

City Toms River State NJ Zip Code 08753-4139

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

Name of Employer UNITED PARCEL SERVICE Occupation OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1958**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68070

Amount of Each Receipt this Period
58

C. Full Name (Last, First, Middle Initial)
Mr William Hunter Jr.

Mailing Address 6 S Union Ave

City Cherry Hill State NJ Zip Code 08002-3329

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **290**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Ai-CN68781

Amount of Each Receipt this Period
40

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

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

118.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 6 S Union Ave

City State Zip Code
Cherry Hill NJ 08002-3329

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69922

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Mr William Hunter Jr.

Mailing Address 6 S Union Ave

City State Zip Code
Cherry Hill NJ 08002-3329

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
315

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71585

Amount of Each Receipt this Period
5

C. Full Name (Last, First, Middle Initial)
Mrs Jean Hyde

Mailing Address 4428 136th PI SE

City State Zip Code
Bellevue WA 98006-2242

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70796

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....	125.00
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)	PAGE 43 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Roger Jacobs

Mailing Address 42 Upper Creek Rd

City State Zip Code
Stockton NJ 08559-1205

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

Name of Employer Occupation
RW Jacobs Consulting LLC Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN71770

Amount of Each Receipt this Period
250

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

Mailing Address 221 S Plaza Ct

City State Zip Code
Mount Pleasant SC 29464-6302

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN71300

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ms. Virginia James

Mailing Address PO Box 60

City State Zip Code
Lambertville NJ 08530

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN68472

Amount of Each Receipt this Period
2600

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 141 Port Royal Dr

City Toms River State NJ Zip Code 08757-3947

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71503

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Ms Doris Jones

Mailing Address 355 Ivan Cain Rd

City Big Clifty State KY Zip Code 42712-6831

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN71303

Amount of Each Receipt this Period
70

C. Full Name (Last, First, Middle Initial)
Ms Doris Jones

Mailing Address 355 Ivan Cain Rd

City Big Clifty State KY Zip Code 42712-6831

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71679

Amount of Each Receipt this Period
70

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

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

165.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Claron Jorgensen

Mailing Address 47 Mohawk Ave

City State Zip Code
Corte Madera CA 94925-1060

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11Ai-CN68592

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr. Henry J Kafel

Mailing Address 9 N Pond Rd

City State Zip Code
Whippany NJ 07981

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68132

Amount of Each Receipt this Period
250

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

Mailing Address 33 Plymouth Rd

City State Zip Code
Clifton NJ 07013

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

Name of Employer Occupation
JANEY MONTGOMERY SCOTT FINANCIAL SERVICES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68404

Amount of Each Receipt this Period
250

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MS Mary B Kasbohm

Mailing Address 149 Fleetwood Ter

City Buffalo State NY Zip Code 14221-4469

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : SA11Ai-CN69187

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
MS Mary B Kasbohm

Mailing Address 149 Fleetwood Ter

City Buffalo State NY Zip Code 14221-4469

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11Ai-CN70231

Amount of Each Receipt this Period
125

C. Full Name (Last, First, Middle Initial)
Mrs. Lois Beth Kercado

Mailing Address 4 Hye Ct

City Milltown State NJ Zip Code 08850

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68397

Amount of Each Receipt this Period
1000

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mrs Carroll K King

Mailing Address 2432 Windrow Dr

City State Zip Code
Princeton NJ 08540-5018

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70761

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Mrs Frances E King

Mailing Address 599 Braybarton Blvd

City State Zip Code
Steubenville OH 43952-2447

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70428

Amount of Each Receipt this Period
400

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

Mailing Address 622 N Dartmouth Rd

City State Zip Code
Spokane Valley WA 99206-3821

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70429

Amount of Each Receipt this Period
50

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Robert Kittredge

Mailing Address 622 N Dartmouth Rd

City State Zip Code
Spokane Valley WA 99206-3821

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71551

Amount of Each Receipt this Period
50

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

Mailing Address 1 Vincent Rd Apt 4a

City State Zip Code
Bronxville NY 10708-6523

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN68287

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mayor Walter George Lacicero

Mailing Address 116 Elizabeth Avenue

City State Zip Code
Lavallette NJ 08735

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

Name of Employer Occupation
Lavallette Twp Mayor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN68462

Amount of Each Receipt this Period
200

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 708 Forecastle Ave

City Beachwood State NJ Zip Code 08722

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

Name of Employer Beachwood Twp Occupation Councilman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11Ai-CN68266

Amount of Each Receipt this Period
 100

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

Mailing Address 2895 N 42nd Ave

City St Petersburg State FL Zip Code 33714

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

Name of Employer alps south llc Occupation ceo

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : SA11Ai-CN68166

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Mr Peter O Lawson-Johnston

Mailing Address 215 Carter Rd

City Princeton State NJ Zip Code 08540-2104

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

Name of Employer GUGGEHEIM BROTHERS Occupation MGMT/EXECUTIVES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11Ai-CN68116

Amount of Each Receipt this Period
 100

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Robert Leighton

Mailing Address 1687 Lake Dr

City State Zip Code
Heath OH 43056-1048

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71080

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
MR Herbert Levin

Mailing Address 724 E Grinnell Dr

City State Zip Code
Burbank CA 91501-1720

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

Name of Employer Occupation
CA Dept of Justice Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68975

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
MR Herbert Levin

Mailing Address 724 E Grinnell Dr

City State Zip Code
Burbank CA 91501-1720

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

Name of Employer Occupation
CA Dept of Justice Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11Ai-CN70068

Amount of Each Receipt this Period
75

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

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

160.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Herbert Levin

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501-1720

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

Name of Employer CA Dept of Justice Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **525**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68140

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
MR Herbert Levin

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501-1720

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

Name of Employer CA Dept of Justice Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN70986

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Mrs Shirley Lewis

Mailing Address 12634 Gianella Rd

City Chico State CA Zip Code 95973-9742

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

Name of Employer James R Lewis Orchards Inc Occupation Orchardist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68112

Amount of Each Receipt this Period
100

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Jason C Ligo

Mailing Address 1021 Bell St

City Toms River State NJ Zip Code 08753

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

Name of Employer Danfoss LLC. Occupation Quality Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **218**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN68353

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr Harold G Lippert

Mailing Address PO Box 965
1012 20th Street

City Fort Benton State MT Zip Code 59442-0965

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11Ai-CN70075

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Ms Lorraine Lovelace

Mailing Address 4974 Rio Verde Dr

City San Jose State CA Zip Code 95118-2303

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN68468

Amount of Each Receipt this Period
100

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Deanna Z Macek

Mailing Address 115 Truman Blvd

City State Zip Code
Oakland NJ 07436-2025

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

Name of Employer Self Occupation Health Care

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11Ai-CN68083

Amount of Each Receipt this Period
 _____ 50

B. Full Name (Last, First, Middle Initial)
Ms Deanna Z Macek

Mailing Address 115 Truman Blvd

City State Zip Code
Oakland NJ 07436-2025

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

Name of Employer Self Occupation Health Care

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11Ai-CN71348

Amount of Each Receipt this Period
 _____ 100

C. Full Name (Last, First, Middle Initial)
Mrs Mary Maker

Mailing Address 609 N Oak St

City State Zip Code
Ponca City OK 74601-4121

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN70928

Amount of Each Receipt this Period
 _____ 100

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

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

_____ 250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard F Maragni

Mailing Address 40 Spring Rd

City Livingston State NJ Zip Code 07039

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

Name of Employer Roman Asphalt Corp. Occupation Controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **308**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11Ai-CN68061

Amount of Each Receipt this Period
58

B. Full Name (Last, First, Middle Initial)
Mrs. Beverly A Marinelli

Mailing Address 28 Flemish Way

City Lumberton State NJ Zip Code 08048

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **725**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68121

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr Matthew Marton

Mailing Address 9 Tunis Cox Rd

City Whitehouse Station State NJ Zip Code 08889-3634

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 27 / 2014

Transaction ID : SA11Ai-CN68075

Amount of Each Receipt this Period
200

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

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

758.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Marie Matchok

Mailing Address 12 Gull Cv

City State Zip Code
Brigantine NJ 08203-1280

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71681

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr Shiro Matsuoka

Mailing Address 9000 Fellowship Rd

City State Zip Code
Basking Ridge NJ 07920-3912

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70719

Amount of Each Receipt this Period
200

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

Mailing Address 253 Indian Trail Dr

City State Zip Code
Franklin Lakes NJ 07417-1014

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11Ai-CN68515

Amount of Each Receipt this Period
250

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Walter McDonald

Mailing Address 2101 Stillwater Rd

City State Zip Code
Newton NJ 07860-5533

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

Name of Employer Occupation
None None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11Ai-CN71410

Amount of Each Receipt this Period
1000

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

Mailing Address 205 S Marion Ave

City State Zip Code
Wenonah NJ 08090

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

Name of Employer Occupation
Cornell Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : SA11Ai-CN68159

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Dr Keith McLarnan

Mailing Address 107 Dovercliff Rd

City State Zip Code
Hattiesburg MS 39402-3012

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

Name of Employer Occupation
Self PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN71083

Amount of Each Receipt this Period
75

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

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

3675.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Luba N Melnyk

Mailing Address 8132 Dongan Ave

City Elmhurst State NY Zip Code 11373-3731

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68931

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Ms Luba N Melnyk

Mailing Address 8132 Dongan Ave

City Elmhurst State NY Zip Code 11373-3731

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN69879

Amount of Each Receipt this Period
700

C. Full Name (Last, First, Middle Initial)
Mrs Mary L Meltzer

Mailing Address 14 Edgecomb Rd

City Binghamton State NY Zip Code 13905-4017

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11Ai-CN71356

Amount of Each Receipt this Period
800

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Carlyle N Montanye Jr.

Mailing Address **PO Box 14**

City **Glyndon** State **MD** Zip Code **21071-0014**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11Ai-CN70022

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
Ms Mary Moodie

Mailing Address **8120 Fellowship Rd**

City **Basking Ridge** State **NJ** Zip Code **07920-3913**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69745

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
MRS Ilse M Niedermayer

Mailing Address **911 Yorkshire Rd**

City **Colonial Heights** State **VA** Zip Code **23834-2622**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1195**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68118

Amount of Each Receipt this Period
295

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

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

770.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Ilse M Niedermayer

Mailing Address 911 Yorkshire Rd

City Colonial Heights	State VA	Zip Code 23834-2622
--------------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2095

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70773

Amount of Each Receipt this Period
900

B. Full Name (Last, First, Middle Initial)
Mr Raymond V O'Brien Jr

Mailing Address 102 Lands End

City Ponte Vedra Beach	State FL	Zip Code 32082-3906
---------------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68215

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Roland Oberlin

Mailing Address 5404 Holly St

City Bellaire	State TX	Zip Code 77401-4704
------------------	-------------	------------------------

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

Name of Employer SOCIETE GENERALE	Occupation PETRO ENG
--------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70724

Amount of Each Receipt this Period
250

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

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Richard R Olander

Mailing Address 1742 N Fitzgerald Ln

City Hanford State CA Zip Code 93230-7901

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71085

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr. Joseph C Olivo

Mailing Address 63 Normandy Rd

City Marlton State NJ Zip Code 08053

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

Name of Employer **Perfect Printing Inc.** Occupation **Self Employed**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Ai-CN68174

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Miss Edith P Palmer

Mailing Address 282 Laroe Rd

City Chester State NY Zip Code 10918-2435

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70411

Amount of Each Receipt this Period
500

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr John B Paoella II

Mailing Address 14 Wyndham Dr

City Bay Head State NJ Zip Code 08742-4652

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11Ai-CN68395

Amount of Each Receipt this Period
 1500

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

Mailing Address 724 Morris Blvd

City Toms River State NJ Zip Code 08753-7228

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

Name of Employer SELF EMPLOYED Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : SA11Ai-CN68242

Amount of Each Receipt this Period
 1500

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

Mailing Address 4808 S Arden Ave

City Sioux Falls State SD Zip Code 57103-5246

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11Ai-CN69871

Amount of Each Receipt this Period
 50

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Nelson Payne

Mailing Address 37119 Saber Ct

City State Zip Code
Greenbackville VA 23356-2617

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Ai-CN69625

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Mr Nelson Payne

Mailing Address 37119 Saber Ct

City State Zip Code
Greenbackville VA 23356-2617

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70418

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr Nelson Payne

Mailing Address 37119 Saber Ct

City State Zip Code
Greenbackville VA 23356-2617

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN71618

Amount of Each Receipt this Period
100

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Randy Pearce

Mailing Address 444 George Pl

City Wyckoff State NJ Zip Code 07481-1820

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN68349

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
MR Robert C Piccirillo

Mailing Address 14 Debaun Ave

City West Caldwell State NJ Zip Code 07006-7111

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

Name of Employer Manager Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11Ai-CN71518

Amount of Each Receipt this Period
200

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

Mailing Address 1000 Parkview Dr Apt 511

City Hallandale Beach State FL Zip Code 33009-2931

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11Ai-CN69474

Amount of Each Receipt this Period
50

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Marjorie E Powell

Mailing Address 265 S Washington St

City State Zip Code
Constantine MI 49042-1049

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN70131

Amount of Each Receipt this Period
75

B. Full Name (Last, First, Middle Initial)
MRS Marjorie E Powell

Mailing Address 265 S Washington St

City State Zip Code
Constantine MI 49042-1049

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN70728

Amount of Each Receipt this Period
75

C. Full Name (Last, First, Middle Initial)
Mr. James Quattlebaum

Mailing Address 2 Bishop Gadsden Way Unit 1038

City State Zip Code
Charleston SC 29412

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

Name of Employer Occupation
Retired physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68137

Amount of Each Receipt this Period
500

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Ms Claire Rains

Mailing Address 420 41st Ave

City San Francisco State CA Zip Code 94121-1512

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11Ai-CN69134

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Mr Frederick J Rast III

Mailing Address 84 1st Ave

City Atlantic Highlands State NJ Zip Code 07716-1289

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

Name of Employer Trachel Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71736

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
MRS Teresa A Regard

Mailing Address 720 E Cherry Ln

City Arlington Heights State IL Zip Code 60004-3217

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69742

Amount of Each Receipt this Period
100

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Donald G Reinhard

Mailing Address 75 Harvard Ave

City State Zip Code
Palmerton PA 18071-1212

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

Name of Employer Occupation
Administrator Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71737

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
MR Edward M Ridge

Mailing Address 1642 Gibson Rd

City State Zip Code
Bensalem PA 19020-3008

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

Name of Employer Occupation
Self Employed Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69665

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
MR Edward M Ridge

Mailing Address 1642 Gibson Rd

City State Zip Code
Bensalem PA 19020-3008

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

Name of Employer Occupation
Self Employed Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70353

Amount of Each Receipt this Period
200

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Carl E Ring JR

Mailing Address 511 Ridgewood Ave

City: Glen Ridge State: NJ Zip Code: 07028-1821

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 388.75

Date of Receipt: 04 / 03 / 2014

Transaction ID : SA11Ai-CN68666

Amount of Each Receipt this Period: 313.75

B. Full Name (Last, First, Middle Initial)
MR Carl E Ring JR

Mailing Address 511 Ridgewood Ave

City: Glen Ridge State: NJ Zip Code: 07028-1821

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 399.68

Date of Receipt: 05 / 12 / 2014

Transaction ID : SA11Ai-CN71519

Amount of Each Receipt this Period: 10.93

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

Mailing Address 106 W Maple Tree Dr

City: Westampton State: NJ Zip Code: 08060-9600

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350

Date of Receipt: 04 / 16 / 2014

Transaction ID : SA11Ai-CN68010

Amount of Each Receipt this Period: 50

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

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

374.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Rogers

Mailing Address 106 W Maple Tree Dr

City State Zip Code
Westampton NJ 08060-9600

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11Ai-CN68056

Amount of Each Receipt this Period
50

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

Mailing Address 106 W Maple Tree Dr

City State Zip Code
Westampton NJ 08060-9600

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Ai-CN68203

Amount of Each Receipt this Period
50

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

Mailing Address 106 W Maple Tree Dr

City State Zip Code
Westampton NJ 08060-9600

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11Ai-CN68299

Amount of Each Receipt this Period
25

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

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

125.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11Ai

Transaction ID : SA11Ai-CN68056

Thomas Rogers who gave \$50 on 4/25 appears on this amendment as an itemized receipt. Due to a different spelling of his name his receipt was unitemized in the original report. The records have been merged and his receipts are all itemized. Total receipts were not affected.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Daniel Rossi

Mailing Address 40 Kashey St

City Clifton State NJ Zip Code 07013-1459

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN68129

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
MR Daniel Rossi

Mailing Address 40 Kashey St

City Clifton State NJ Zip Code 07013-1459

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN71622

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mr. Paul E Rumley

Mailing Address 165 Winding Way

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Metro Commercial Real Estate Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11Ai-CN63004

Amount of Each Receipt this Period
250

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Robert Ryan

Mailing Address 46 Fairway Ave

City West Orange State NJ Zip Code 07052-2238

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70371

Amount of Each Receipt this Period
500

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

Mailing Address 4 Campus Dr

City Parsippany State NJ Zip Code 07054

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

Name of Employer Summit Financial Services Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11Ai-CN68392

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Schiavone

Mailing Address 7 Carton Rd

City Morristown State NJ Zip Code 07960

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

Name of Employer RDC Golf Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3900**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11Ai-CN68325

Amount of Each Receipt this Period
1300

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

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

Mailing Address 4800 Fillmore Ave Apt 603

City Alexandria State VA Zip Code 22311-5057

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11Ai-CN71521

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
Mrs. Carol Silverstein

Mailing Address 1120 Califon-Cokesbury Rd

City Lebanon State NJ Zip Code 08833

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

Name of Employer Self employed Occupation Home furnishings designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2014

Transaction ID : SA11Ai-CN67651

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Miss Holley Simmons

Mailing Address 511 Clinton Ave

City Toms River State NJ Zip Code 08753-6706

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN68398

Amount of Each Receipt this Period
1000

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

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

1135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr Orval Skrdlant

Mailing Address 4316 Road W1

City Norton State KS Zip Code 67654-5465

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **212**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69686

Amount of Each Receipt this Period
106

B. Full Name (Last, First, Middle Initial)
Mr Orval Skrdlant

Mailing Address 4316 Road W1

City Norton State KS Zip Code 67654-5465

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **106**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11Ai-CN70687

Amount of Each Receipt this Period
-106

Returned Check

C. Full Name (Last, First, Middle Initial)
Mr. Ron Soussa

Mailing Address 21 Eugene Dr

City Montville State NJ Zip Code 07045

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **218**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN68195

Amount of Each Receipt this Period
118

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

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

118.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Ms. Avis Spies
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 Heyburn Rd
 City Chadds Ford State PA Zip Code 19317-9707
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : SA11Ai-CN70781
 Amount of Each Receipt this Period
 100

B. MR William Spreen
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Park Rd
 City Fair Haven State NJ Zip Code 07704-3136
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 245

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014
Transaction ID : SA11Ai-CN70446
 Amount of Each Receipt this Period
 35

C. MR William Spreen
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Park Rd
 City Fair Haven State NJ Zip Code 07704-3136
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 280

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2014
Transaction ID : SA11Ai-CN71522
 Amount of Each Receipt this Period
 35

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

170.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR Matthew Stabinsky

Mailing Address 606 Bluebell Dr

City Jackson State NJ Zip Code 08527-4109

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11Ai-CN69963

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Charles E Steen III

Mailing Address 170 Post Kunhardt Rd

City Bernardsville State NJ Zip Code 07924-1516

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68099

Amount of Each Receipt this Period
100

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

Mailing Address 6 Alwyngton Rd

City Chestnut Hill State MA Zip Code 02467

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

Name of Employer highland consumer fund Occupation investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Ai-CN68160

Amount of Each Receipt this Period
500

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Jack Stephenson

Mailing Address 38 Briarcliff Rd

City State Zip Code
Gilford NH 03249-6705

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11Ai-CN68094

Amount of Each Receipt this Period
295

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

Mailing Address 28 Pennsylvania Ave

City State Zip Code
Flemington NJ 08822

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

Name of Employer Occupation
Johnson & Johnson Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11Ai-CN68028

Amount of Each Receipt this Period
1000

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

Mailing Address 7623 Hayfield Rd

City State Zip Code
Alexandria VA 22315-4034

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
247

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN71692

Amount of Each Receipt this Period
53

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

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

1348.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gerald W Sykes

Mailing Address 382 Centerton Rd

City State Zip Code
Bridgeton NJ 08302

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

Name of Employer Occupation
G & G Communications Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11Ai-CN68386

Amount of Each Receipt this Period
2350

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

Mailing Address 4 Ellington Dr

City State Zip Code
Columbus NJ 08022-2300

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Ai-CN69629

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Mr David A Thomas

Mailing Address 1132 Calle Florecita

City State Zip Code
Chula Vista CA 91910-7901

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71051

Amount of Each Receipt this Period
50

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MRS Marina Timmermans

Mailing Address 1703 Main St

City Lynden State WA Zip Code 98264-9115

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Ai-CN71648

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Mr Bruce Townsend

Mailing Address 701 Oak Ln

City Franklin Lakes State NJ Zip Code 07417-2308

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11Ai-CN68110

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
MR E Lloyd Treadgold

Mailing Address 1025 Anza St

City San Francisco State CA Zip Code 94118-4009

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11Ai-CN69103

Amount of Each Receipt this Period
50

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR E Lloyd Treadgold

Mailing Address 1025 Anza St

City San Francisco State CA Zip Code 94118-4009

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Ai-CN70847

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mrs Margaret Turiello

Mailing Address 678 Foothill Rd

City Bridgewater State NJ Zip Code 08807-1848

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68214

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Howard W Vaccarella

Mailing Address 309 Colonial Dr

City Toms River State NJ Zip Code 08753

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11Ai-CN68046

Amount of Each Receipt this Period
750

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Howard W Vaccarella

Mailing Address 309 Colonial Dr

City Toms River State NJ Zip Code 08753

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **870**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11Ai-CN68329

Amount of Each Receipt this Period
120

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

Mailing Address 1909 Canterbury St

City Irving State TX Zip Code 75062-3551

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

Name of Employer Information Requested Occupation Information Requested
 RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN69714

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Ms Gertrude Vandyk

Mailing Address 842 Fox Hedge Rd

City Franklin Lks State NJ Zip Code 07417

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

Name of Employer Information Requested Occupation Information Requested
 Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71001

Amount of Each Receipt this Period
300

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

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

470.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Mrs Vera Vincz

Mailing Address 26 Plymouth Pl

City Edison State NJ Zip Code 08837-3130

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : SA11Ai-CN71098

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
MS Helen Von Quintus

Mailing Address PO Box 151685

City Austin State TX Zip Code 78715-1685

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11Ai-CN69150

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
MS Helen Von Quintus

Mailing Address PO Box 151685

City Austin State TX Zip Code 78715-1685

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11Ai-CN70302

Amount of Each Receipt this Period
 50

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MS Helen Von Quintus

Mailing Address **PO Box 151685**

City **Austin** State **TX** Zip Code **78715-1685**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Ai-CN71002

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mrs Elizabeth R Wade

Mailing Address **5364 Calle Real Apt D**

City **Santa Barbara** State **CA** Zip Code **93111-1685**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11Ai-CN68821

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr Daniel Walsh

Mailing Address **4 N 32nd Ave**

City **Longport** State **NJ** Zip Code **08403-1524**

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

Name of Employer **Unemployed** Occupation **Project Manager-Engineer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11Ai-CN68212

Amount of Each Receipt this Period
125

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

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

375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
MR James Walsh

Mailing Address 103 Mineral Springs Rd

City Highland Mills State NY Zip Code 10930-6228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11Ai-CN68023

Amount of Each Receipt this Period
100

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

Mailing Address 103 Mineral Springs Rd

City Highland Mills State NY Zip Code 10930-6228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11Ai-CN68095

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
MR James Walsh

Mailing Address 103 Mineral Springs Rd

City Highland Mills State NY Zip Code 10930-6228

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11Ai-CN70341

Amount of Each Receipt this Period
100

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

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

Mailing Address 125 Saw Mill Rd

City North Haledon State NJ Zip Code 07508-2712

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN71696

Amount of Each Receipt this Period
30

B. Full Name (Last, First, Middle Initial)
Ms Catherine Warren

Mailing Address 356 Rossway Rd

City Pleasant Valley State NY Zip Code 12569-7415

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11Ai-CN71528

Amount of Each Receipt this Period
1200

C. Full Name (Last, First, Middle Initial)
Mrs. Beth Welsh

Mailing Address 129 Blackburn Rd

City Summit State NJ Zip Code 07901

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

Name of Employer Bassett Associates Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11Ai-CN68131

Amount of Each Receipt this Period
200

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

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

1430.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Joseph Williams

Mailing Address 1018 Berkeley Ave

City State Zip Code
Ocean NJ 07712

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

Name of Employer Occupation
JP TURNER & CO RETAIL/SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11Ai-CN68047

Amount of Each Receipt this Period
750

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

Mailing Address 1018 Berkeley Ave

City State Zip Code
Ocean NJ 07712

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

Name of Employer Occupation
JP TURNER & CO RETAIL/SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
810

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11Ai-CN68331

Amount of Each Receipt this Period
60

C. Full Name (Last, First, Middle Initial)
Mr. Preston Wood

Mailing Address 11 Landsdown Rd

City State Zip Code
Annandale NJ 08801-3602

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11Ai-CN71371

Amount of Each Receipt this Period
50

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

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

860.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

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

Mailing Address 515 Grace Ter

City State Zip Code
New Oxford PA 17350-7325

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 22 2014

Transaction ID : SA11Ai-CN70058

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
I.T. Management

Mailing Address PO Box 6328

City State Zip Code
Portland OR 97228-6328

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

Name of Employer Occupation
Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 08 2014

Transaction ID : SA11Ai-CN68318

Amount of Each Receipt this Period
500

SEE MEMO ITEM BELOW

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

Mailing Address PO Box 6328

City State Zip Code
Portland OR 97228

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

Name of Employer Occupation
I.T. Management Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 08 2014

Transaction ID : SA11Ai-CN68320

Amount of Each Receipt this Period
500

Partnership-I.T. Management

[MEMO ITEM]
\$500.00 MEMO Partnership Attributed

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 161
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Longan For Congress

A. Full Name (Last, First, Middle Initial)
Edgewood Realty Associates LLC

Mailing Address 21 Ravona St

City Clifton State NJ Zip Code 07012

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN71653

Amount of Each Receipt this Period
500

SEE MEMO ITEM BELOW

B. Full Name (Last, First, Middle Initial)
Mr Evangelos Megariotis Md

Mailing Address 21 Ravona St

City Clifton State NJ Zip Code 07012

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

Name of Employer Occupation
 Self Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Ai-CN71808

Amount of Each Receipt this Period
500

Partnership-Edgewood Realty Associates

[MEMO ITEM]
 \$500.00 MEMO Partnership Attributed

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

84711.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 161
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Longan For Congress

A. Gun Owners Of America Political Victory Fund

Full Name (Last, First, Middle Initial)
Mailing Address 8001 Forbes Pl Ste 102

City Springfield State VA Zip Code 22151

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11C-CN68317

Amount of Each Receipt this Period
 2000

B. Lavallette PBA 372

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 534

City Lavallette State NJ Zip Code 08735

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11C-CN68448

Amount of Each Receipt this Period
 250

C. Liberty PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 602

City Lake Jackson State TX Zip Code 77566

FEC ID number of contributing federal political committee. **C C00234641**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11C-CN68209

Amount of Each Receipt this Period
 1500

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

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

3750.00

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 161
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Lonigan For Congress

Full Name (Last, First, Middle Initial) Mr Steven Lonigan		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 212 Larch Ave		Transaction ID : SA13a-LN7
City Bogota	State NJ Zip Code 07603	
FEC ID number of contributing federal political committee. C H8NJ09088		Amount of Each Receipt this Period 50000
Name of Employer None	Occupation Candidate	Loan
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50000	

Full Name (Last, First, Middle Initial) Mr Steven Lonigan		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 212 Larch Ave		Transaction ID : SA13a-LN8
City Bogota	State NJ Zip Code 07603	
FEC ID number of contributing federal political committee. C H8NJ09088		Amount of Each Receipt this Period 40000
Name of Employer None	Occupation Candidate	Loan
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 40000	

Full Name (Last, First, Middle Initial) Mr Steven Lonigan		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 212 Larch Ave		Transaction ID : SA13a-LN9
City Bogota	State NJ Zip Code 07603	
FEC ID number of contributing federal political committee. C H8NJ09088		Amount of Each Receipt this Period 6500
Name of Employer None	Occupation Candidate	Loan
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6500	

SUBTOTAL of Receipts This Page (optional).....	96500.00
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: PAGE 90 OF 161
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Lonigan For Congress

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

Mailing Address 212 Larch Ave

City Bogota State NJ Zip Code 07603

FEC ID number of contributing federal political committee. **C H8NJ09088**

Name of Employer None Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 100000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA13a-LN10

Amount of Each Receipt this Period
 100000

Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100000.00

196500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. TD Bank		M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	Category/Type 001	15.00
Candidate Name	Transaction ID : SB17-EX3292	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. TD Bank		M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	Category/Type 001	15.00
Candidate Name	Transaction ID : SB17-EX3179	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. TD Bank		M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	Category/Type 001	25.00
Candidate Name	Transaction ID : SB17-EX3180	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. TD Bank		M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	Bank Fee
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	25.00
		Transaction ID : SB17-EX3181

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. TD Bank		M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	Bank Fee
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	15.00
		Transaction ID : SB17-EX3182

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. TD Bank		M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fee	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	Bank Fee
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	15.00
		Transaction ID : SB17-EX3183

SUBTOTAL of Disbursements This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. TD Bank		M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address PO Box 1377		Amount of Each Disbursement this Period	
City Lewiston State ME Zip Code 04243		15.00	
Purpose of Disbursement Bank Fee		Transaction ID : SB17-EX3184	
Candidate Name		Bank Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. TD Bank		M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address PO Box 1377		Amount of Each Disbursement this Period	
City Lewiston State ME Zip Code 04243		25.00	
Purpose of Disbursement Bank Fee		Transaction ID : SB17-EX3185	
Candidate Name		Bank Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. TD Bank		M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address PO Box 1377		Amount of Each Disbursement this Period	
City Lewiston State ME Zip Code 04243		25.00	
Purpose of Disbursement Bank Fee		Transaction ID : SB17-EX3186	
Candidate Name		Bank Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Category/Type		001	

SUBTOTAL of Disbursements This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. TD Bank		M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fees	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fees
State: District:		Transaction ID : SB17-EX3288
		15.00

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. TD Bank		M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fees	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fees
State: District:		Transaction ID : SB17-EX3289
		25.00

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. TD Bank		M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO Box 1377		Amount of Each Disbursement this Period
City Lewiston	State ME	Zip Code 04243
Purpose of Disbursement Bank Fees	001	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bank Fees
State: District:		Transaction ID : SB17-EX3290
		25.00

SUBTOTAL of Disbursements This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 997.00
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement Software Licensing 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3233
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Software Licensing	

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 997.00
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement Software Licensing 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3234
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Software Licensing	

Full Name (Last, First, Middle Initial) c. Vanco Services LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 23.57
City Minnetonka State MN Zip Code 55343	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3191
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Credit Card Fees	

SUBTOTAL of Disbursements This Page (optional).....	2017.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 24.44	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3192	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 81.03	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3193	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 6.94	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3194	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	112.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 22.94	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3195	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 5.67	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3196	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 1.73	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3197	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	30.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 3.66
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3198
Purpose of Disbursement Credit Card Fees		001 Category/ Type	
Candidate Name			Credit Card Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 52.80
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3199
Purpose of Disbursement Credit Card Fees		001 Category/ Type	
Candidate Name			Credit Card Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 6.06
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3200
Purpose of Disbursement Credit Card Fees		001 Category/ Type	
Candidate Name			Credit Card Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	62.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 3.20
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17-EX3201
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Fees
State: District:		

Full Name (Last, First, Middle Initial) B. Vanco Services LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 10.30
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17-EX3203
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Fees
State: District:		

Full Name (Last, First, Middle Initial) c. Vanco Services LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 6.63
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17-EX3202
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 1.83	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3204	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 24.99	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3205	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 32.90	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3206	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	59.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 9.14	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3207	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 5.46	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3208	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 8.28	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3209	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	22.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 56.83	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3210	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 9.86	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3211	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 12.57	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3212	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	79.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 75.92
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Fees		Candidate Name	Transaction ID : SB17-EX3213
001 Category/Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card Fees
State: District:			

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 133.47
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Fees		Candidate Name	Transaction ID : SB17-EX3214
001 Category/Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card Fees
State: District:			

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 82.63
City Minnetonka	State MN	Zip Code 55343	
Purpose of Disbursement Credit Card Fees		Candidate Name	Transaction ID : SB17-EX3215
001 Category/Type			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card Fees
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	292.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 12.42	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3216	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 13.69	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3217	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 18.22	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3218	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	44.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 51.70	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3219	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200			Amount of Each Disbursement this Period 10.71	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX3220	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Credit Card Fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. The Printing Express LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 21 Warehouse Road			Amount of Each Disbursement this Period 3815.25	
City Harrisonburg	State VA	Zip Code 22801	Transaction ID : SB17-EX3139	
Purpose of Disbursement Printing		Category/ Type 001	Printing	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3877.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. The Printing Express LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014	
Mailing Address 21 Warehouse Road			Amount of Each Disbursement this Period 973.19	
City Harrisonburg	State VA	Zip Code 22801	Transaction ID : SB17-EX3231	
Purpose of Disbursement Stationary		Category/ Type 001	Stationary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. The Printing Express LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 21 Warehouse Road			Amount of Each Disbursement this Period 78.98	
City Harrisonburg	State VA	Zip Code 22801	Transaction ID : SB17-EX3232	
Purpose of Disbursement Palm Cards		Category/ Type 001	Palm Cards	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 557 Route 17 South			Amount of Each Disbursement this Period 42.79	
City Paramus	State NJ	Zip Code 07652	Transaction ID : SB17-EX3159	
Purpose of Disbursement Office Supplies		Category/ Type 001	Office Supplies	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1094.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 28.13
City Paramus	State NJ	
Purpose of Disbursement Office Supplies	Zip Code 07652	Office Supplies
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 14.67
City Paramus	State NJ	
Purpose of Disbursement Office Supplies	Zip Code 07652	Office Supplies
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 42.79
City Paramus	State NJ	
Purpose of Disbursement Office Supplies	Zip Code 07652	Office Supplies
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	85.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 140.67
City Paramus	State NJ	Zip Code 07652
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3163
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____ District: _____	Office Supplies	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 70.62
City Paramus	State NJ	Zip Code 07652
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____ District: _____	Office Supplies	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 12.60
City Paramus	State NJ	Zip Code 07652
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3165
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____ District: _____	Office Supplies	

SUBTOTAL of Disbursements This Page (optional).....	223.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 164.35
City Paramus	State NJ	
Zip Code 07652	Purpose of Disbursement Office Supplies	Transaction ID : SB17-EX3166
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 7.27
City Paramus	State NJ	
Zip Code 07652	Purpose of Disbursement Office Supplies	Transaction ID : SB17-EX3167
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 557 Route 17 South		Amount of Each Disbursement this Period 60.03
City Paramus	State NJ	
Zip Code 07652	Purpose of Disbursement Office Supplies	Transaction ID : SB17-EX3261
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	231.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 250.60
City Ridgewood	State NJ	
Purpose of Disbursement Postage	Zip Code 07450	Postage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 147.00
City Ridgewood	State NJ	
Purpose of Disbursement Postage	Zip Code 07450	Postage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 1715.00
City Ridgewood	State NJ	
Purpose of Disbursement Postage	Zip Code 07450	Postage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2112.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 392.00
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Postage	Transaction ID : SB17-EX3154
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Postage
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 1.61
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Postage	Transaction ID : SB17-EX3155
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Postage
State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 16.95
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Postage	Transaction ID : SB17-EX3156
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	410.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 143 E Ridgewood Ave			Amount of Each Disbursement this Period 3.52
City Ridgewood	State NJ	Zip Code 07450	
Purpose of Disbursement Postage	Candidate Name		Transaction ID : SB17-EX3157
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Postage
State: District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 143 E Ridgewood Ave			Amount of Each Disbursement this Period 3.01
City Ridgewood	State NJ	Zip Code 07450	
Purpose of Disbursement Postage	Candidate Name		Transaction ID : SB17-EX3158
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Postage
State: District:			

Full Name (Last, First, Middle Initial) c. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 143 E Ridgewood Ave			Amount of Each Disbursement this Period 49.00
City Ridgewood	State NJ	Zip Code 07450	
Purpose of Disbursement Postage	Candidate Name		Transaction ID : SB17-EX3286
	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Postage
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	55.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 78.40
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Postage	Transaction ID : SB17-EX3287
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Postage
State: District:		

Full Name (Last, First, Middle Initial) B. Treasurer State Of New Jersey		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 111		Amount of Each Disbursement this Period 358.82
City Trenton State NJ Zip Code 08625	Purpose of Disbursement Payroll Taxes	Transaction ID : SB17-EX3268
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll Taxes
State: District:		

Full Name (Last, First, Middle Initial) C. Treasurer State Of New Jersey		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address PO Box 111		Amount of Each Disbursement this Period 431.87
City Trenton State NJ Zip Code 08625	Purpose of Disbursement Payroll Taxes	Transaction ID : SB17-EX3269
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll Taxes
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	869.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Airnet Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address P.O. Box 11181		Amount of Each Disbursement this Period 339.71
City Chattanooga	State TN	
Purpose of Disbursement Technical Support	Zip Code 37401	Transaction ID : SB17-EX3387
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Technical Support
State: District:		

Full Name (Last, First, Middle Initial) B. Obed Bazakian		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 1179.33
City Ridgewood	State NJ	
Purpose of Disbursement Payroll	Zip Code 07450	Transaction ID : SB17-EX3248
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll
State: District:		

Full Name (Last, First, Middle Initial) c. Obed Bazakian		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 1275.53
City Ridgewood	State NJ	
Purpose of Disbursement Payroll	Zip Code 07450	Transaction ID : SB17-EX3249
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2794.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Obed Bazakian		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 881.55 Transaction ID : SB17-EX3250
City Ridgewood	State NJ	
Zip Code 07450	Purpose of Disbursement Payroll	Payroll
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Gretchen Hahn		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 412.50 Transaction ID : SB17-EX3237
City Ridgewood	State NJ	
Zip Code 07450	Purpose of Disbursement Fundraising Consultant	Fundraising Consultant
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Gretchen Hahn		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 2108.04 Transaction ID : SB17-EX3238
City Ridgewood	State NJ	
Zip Code 07450	Purpose of Disbursement Fundraising Consulting	Fundraising Consulting
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3402.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Christopher Santora		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 2074.98
City Ridgewood	State NJ	Zip Code 07450
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3242
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

Full Name (Last, First, Middle Initial) B. Christopher Santora		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 2114.98
City Ridgewood	State NJ	Zip Code 07450
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3243
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

Full Name (Last, First, Middle Initial) c. Christopher Santora		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 38 E. Ridgewood Avenue #181		Amount of Each Disbursement this Period 2074.98
City Ridgewood	State NJ	Zip Code 07450
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3247
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

SUBTOTAL of Disbursements This Page (optional).....	6264.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 338.67
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3293
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) B. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 15.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3294
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) c. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 66.25
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3295
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	419.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 462.85
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Fundraising	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Fundraising	
State: District:		

Full Name (Last, First, Middle Initial) B. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 30.00
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Fundraising	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Fundraising	
State: District:		

Full Name (Last, First, Middle Initial) c. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 65.00
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Fundraising	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Fundraising	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	557.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 40.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3298
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) B. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 65.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3299
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) c. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 291.17
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3308
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	396.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 65.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3309
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) B. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 20.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3314
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) c. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 55.25
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3310
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	140.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 253.32
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3312
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) B. First Virginia Community Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 11325 Random Hills Rd		Amount of Each Disbursement this Period 815.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3313
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Caging Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 504 SHAW ROAD SUITE 217		Amount of Each Disbursement this Period 1119.97
City STERLING	State VA	
Zip Code 20166	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3306
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2188.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Capitol Caging Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 504 SHAW ROAD SUITE 217		Amount of Each Disbursement this Period 500.00
City STERLING State VA Zip Code 20166	Purpose of Disbursement Fundraising 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX3307
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	
Fundraising		

Full Name (Last, First, Middle Initial) B. Impact Dialing LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 70 NE Tillamook Street		Amount of Each Disbursement this Period 450.00
City Portland State OR Zip Code 97212	Purpose of Disbursement Phone Bank 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX3284
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	
Phone Bank		

Full Name (Last, First, Middle Initial) C. Century Data Mailing Systems		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount of Each Disbursement this Period 27327.52
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Fundraising 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX3302
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	
Fundraising		

SUBTOTAL of Disbursements This Page (optional).....	28277.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Century Data Mailing Systems		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount of Each Disbursement this Period 4797.22
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Fundraising 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3303
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Fundraising	

Full Name (Last, First, Middle Initial) B. Century Data Mailing Systems		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount of Each Disbursement this Period 23132.22
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Fundraising 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3304
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Fundraising	

Full Name (Last, First, Middle Initial) c. Simpkins Escrow LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 29243 St Just Dr		Amount of Each Disbursement this Period 358.76
City UNIONVILLE State VA Zip Code 22567	Purpose of Disbursement Fundraising 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX3300
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Fundraising	

SUBTOTAL of Disbursements This Page (optional).....	28288.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 161			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Simpkins Escrow LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 29243 St Just Dr		Amount of Each Disbursement this Period 241.35
City UNIONVILLE	State VA	
Zip Code 22567	Purpose of Disbursement Fundraising	Transaction ID : SB17-EX3301
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) B. Arthur J. Finkelstein & Assoc. Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 16 North Astor Street		Amount of Each Disbursement this Period 5000.00
City Irvington	State NY	
Zip Code 10533	Purpose of Disbursement Strategic Consulting	Transaction ID : SB17-EX3262
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Strategic Consulting
State: District:		

Full Name (Last, First, Middle Initial) C. Arthur J. Finkelstein & Assoc. Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 16 North Astor Street		Amount of Each Disbursement this Period 7381.00
City Irvington	State NY	
Zip Code 10533	Purpose of Disbursement Polling	Transaction ID : SB17-EX3263
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Polling
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12622.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Campaign Marketing Strategies		M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 3240 Wilson Boulevard Suite 202		Amount of Each Disbursement this Period
City Arlington	State VA	Zip Code 22201
Purpose of Disbursement Phone Bank		25.00
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX3240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Phone Bank
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Campaign Marketing Strategies		M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 3240 Wilson Boulevard Suite 202		Amount of Each Disbursement this Period
City Arlington	State VA	Zip Code 22201
Purpose of Disbursement Phone Bank		26.69
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX3241
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Phone Bank
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Home Depot		M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1035 Rt 1		Amount of Each Disbursement this Period
City Edison	State NJ	Zip Code 08837
Purpose of Disbursement Signage		426.92
Candidate Name	Category/ Type 001	Transaction ID : SB17-EX3223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Signage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	478.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Braddock's Tavern		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 39 S Main St		Amount of Each Disbursement this Period 82.84
City Medford	State NJ	Zip Code 08055
Purpose of Disbursement Meals	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3169	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Meals
State: District:		

Full Name (Last, First, Middle Initial) B. Integram		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 22695 Commerce Center Court		Amount of Each Disbursement this Period 9380.60
City Dulles	State VA	Zip Code 20166
Purpose of Disbursement Fundraising	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3305	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Curtis		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 5 Halifax Ct		Amount of Each Disbursement this Period 1153.01
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3244	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10616.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Elizabeth Curtis		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 5 Halifax Ct		Amount of Each Disbursement this Period 1396.10
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Payroll	Transaction ID : SB17-EX3245
Candidate Name	Category/Type 001	Payroll
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Elizabeth Curtis		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5 Halifax Ct		Amount of Each Disbursement this Period 1622.38
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Payroll	Transaction ID : SB17-EX3246
Candidate Name	Category/Type 001	Payroll
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO Box 931000		Amount of Each Disbursement this Period 4185.34
City Louisville State KY Zip Code 40293	Purpose of Disbursement Payroll Taxes	Transaction ID : SB17-EX3264
Candidate Name	Category/Type 001	Payroll Taxes
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7203.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 931000		Amount of Each Disbursement this Period 1510.88
City Louisville State KY Zip Code 40293	Purpose of Disbursement Payroll Taxes	Transaction ID : SB17-EX3265
Candidate Name	Category/Type 001	Payroll Taxes
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address PO Box 931000		Amount of Each Disbursement this Period 4926.05
City Louisville State KY Zip Code 40293	Purpose of Disbursement Payroll Taxes	Transaction ID : SB17-EX3266
Candidate Name	Category/Type 001	Payroll Taxes
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Medport Diner		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 122 New Jersey 70		Amount of Each Disbursement this Period 119.87
City Medford State NJ Zip Code 08055	Purpose of Disbursement Meals	Transaction ID : SB17-EX3168
Candidate Name	Category/Type 001	Meals
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6556.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. William McClintock Associates			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014	
Mailing Address 1583 E 2nd St			Amount of Each Disbursement this Period 632.37	
City Scotch Plains	State NJ	Zip Code 07076	Transaction ID : SB17-EX3235	
Purpose of Disbursement Envelopes		Category/ Type 001	Envelopes	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) B. William McClintock Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 1583 E 2nd St			Amount of Each Disbursement this Period 2076.87	
City Scotch Plains	State NJ	Zip Code 07076	Transaction ID : SB17-EX3236	
Purpose of Disbursement Stationary		Category/ Type 001	Stationary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) c. Labels & Lists Inc			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address 2500 116th Ave NE #3			Amount of Each Disbursement this Period 260.93	
City Bellevue	State WA	Zip Code 98004	Transaction ID : SB17-EX3279	
Purpose of Disbursement List Acquisition		Category/ Type 001	List Acquisition	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2970.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Labels & Lists Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 2500 116th Ave NE #3		Amount of Each Disbursement this Period 300.88
City Bellevue State WA Zip Code 98004	Purpose of Disbursement List Acquisition	Transaction ID : SB17-EX3280
Candidate Name	Category/Type 001	List Acquisition
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Charles C Johnson Research Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1986 Verde Vista Dr		Amount of Each Disbursement this Period 532.00
City Monterey Park State CA Zip Code 91754	Purpose of Disbursement Transportation	Transaction ID : SB17-EX3275
Candidate Name	Category/Type 001	Transportation
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 12600.00
City Richmond State VA Zip Code 23219	Purpose of Disbursement Advertising - print	Transaction ID : SB17-EX3146
Candidate Name	Category/Type 001	Advertising - print
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13432.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 13844.00
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Advertising - print	Category/Type 001	Transaction ID : SB17-EX3147
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - print
State: District:		

Full Name (Last, First, Middle Initial) B. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 13836.00
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Advertising - print	Category/Type 001	Transaction ID : SB17-EX3148
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - print
State: District:		

Full Name (Last, First, Middle Initial) C. Creative Direct LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 25 E Main St		Amount of Each Disbursement this Period 15511.70
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement Advertising - print	Category/Type 001	Transaction ID : SB17-EX3149
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - print
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	43191.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Creative Direct LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 25 E Main St			Amount of Each Disbursement this Period 19518.00
City Richmond	State VA	Zip Code 23219	
Purpose of Disbursement Advertising - print		Category/ Type 001	Transaction ID : SB17-EX3150
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Advertising - print
State: District:			

Full Name (Last, First, Middle Initial) B. Creative Direct LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 25 E Main St			Amount of Each Disbursement this Period 13842.00
City Richmond	State VA	Zip Code 23219	
Purpose of Disbursement Advertising - Print		Category/ Type 001	Transaction ID : SB17-EX3222
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Advertising - Print
State: District:			

Full Name (Last, First, Middle Initial) c. Alexa Coombs			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 10524 Rosehaven St #111			Amount of Each Disbursement this Period 269.00
City Fairfax	State VA	Zip Code 22030	
Purpose of Disbursement Transportation		Category/ Type 001	Transaction ID : SB17-EX3140
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Transportation
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	33629.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Alexa Coombs		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 10524 Rosehaven St #111		Amount of Each Disbursement this Period 889.60
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3251
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

Full Name (Last, First, Middle Initial) B. Alexa Coombs		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 10524 Rosehaven St #111		Amount of Each Disbursement this Period 1102.60
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3252
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

Full Name (Last, First, Middle Initial) c. Alexa Coombs		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 10524 Rosehaven St #111		Amount of Each Disbursement this Period 674.89
City Fairfax	State VA	Zip Code 22030
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3253
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Payroll	

SUBTOTAL of Disbursements This Page (optional).....	2667.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Association Of NJ Rifle & Pistol Clubs			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014	
Mailing Address 179-9 Rt 46 #125			Amount of Each Disbursement this Period 600.00	
City Rockaway	State NJ	Zip Code 07866	Transaction ID : SB17-EX3291	
Purpose of Disbursement Advertising		Category/ Type 001		
Candidate Name			Advertising	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) B. Strategic Compliance Resources LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014	
Mailing Address 2100 E Katella Ave #408			Amount of Each Disbursement this Period 2250.00	
City Anaheim	State CA	Zip Code 92806	Transaction ID : SB17-EX3239	
Purpose of Disbursement Technical Support		Category/ Type 001		
Candidate Name			Technical Support	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) c. Constance Murray			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 629 Devon Ave			Amount of Each Disbursement this Period 851.12	
City Moorestown	State NJ	Zip Code 08057	Transaction ID : SB17-EX3256	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name			Payroll	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

SUBTOTAL of Disbursements This Page (optional).....	3701.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 161			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Constance Murray		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 629 Devon Ave		Amount of Each Disbursement this Period 1119.80
City Moorestown	State NJ	
Purpose of Disbursement Payroll	Zip Code 08057	Payroll
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Constance Murray		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 629 Devon Ave		Amount of Each Disbursement this Period 771.67
City Moorestown	State NJ	
Purpose of Disbursement Payroll	Zip Code 08057	Payroll
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C. Constance Murray		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 629 Devon Ave		Amount of Each Disbursement this Period 588.00
City Moorestown	State NJ	
Purpose of Disbursement Postage	Zip Code 08057	Postage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2479.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 143 E Ridgewood Ave		Amount of Each Disbursement this Period 588.00
City Ridgewood	State NJ	
Zip Code 07450	Purpose of Disbursement Postage	Transaction ID : SB17-EX3260
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Multi Media Services Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 915 King St		Amount of Each Disbursement this Period 13770.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Advertising - Television	Transaction ID : SB17-EX3141
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - Television
State: District:		

Full Name (Last, First, Middle Initial) c. Multi Media Services Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 915 King St		Amount of Each Disbursement this Period 13778.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Advertising - Television	Transaction ID : SB17-EX3142
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - Television
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	27548.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Multi Media Services Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 915 King St		Amount of Each Disbursement this Period 20000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Advertising - Television	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3143
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - Television
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Multi Media Services Corp		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 915 King St		Amount of Each Disbursement this Period 30000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Advertising - Television	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3144
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - Television
State: _____ District: _____		

Full Name (Last, First, Middle Initial) c. Multi Media Services Corp		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 915 King St		Amount of Each Disbursement this Period 42500.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Advertising - Television	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising - Television
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	92500.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17-EX3143

Two disbursements appeared as debt on the original pre-primary report. Because the filing period fell in the middle of the month and within a week of the end of the reporting period the checks did not show as cleared at the time of filing. The information conforms to the bank statement and is now reported correctly. They are \$339.71 to Airnet Group and \$2514.50 to Jamestown Associates.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Multi Media Services Corp			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 915 King St			Amount of Each Disbursement this Period 55000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB17-EX3221	
Purpose of Disbursement Advertising - Television		001 Category/Type		
Candidate Name			Advertising - Television	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) B. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014	
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 8600.00	
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17-EX3270	
Purpose of Disbursement Production		001 Category/Type		
Candidate Name			Production	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) C. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 15214.17	
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17-EX3271	
Purpose of Disbursement Production		001 Category/Type		
Candidate Name			Production	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: _____ District: _____				

SUBTOTAL of Disbursements This Page (optional).....	78814.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 1543.86
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17-EX3272
Purpose of Disbursement Palm Cards	Category/ Type 001		
Candidate Name			Palm Cards
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 2140.00
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17-EX3273
Purpose of Disbursement Production	Category/ Type 001		
Candidate Name			Production
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2014
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 2514.50
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17-EX3321
Purpose of Disbursement Production	Category/ Type 001		
Candidate Name			Production
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	6198.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Thaler Web Solutions LLC		Date of Disbursement MM / DD / YYYY 04 / 17 / 2014
Mailing Address 158 E River Rd		Amount of Each Disbursement this Period 2812.50
City Rumson	State NJ Zip Code 07760	
Purpose of Disbursement Technical Support	Category/Type 001	Transaction ID : SB17-EX3274
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Technical Support
State: District:		

Full Name (Last, First, Middle Initial) B. Timothy Kelly		Date of Disbursement MM / DD / YYYY 04 / 17 / 2014
Mailing Address PO Box 605		Amount of Each Disbursement this Period 870.42
City Waverly	State PA Zip Code 18471	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : SB17-EX3254
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll
State: District:		

Full Name (Last, First, Middle Initial) c. Timothy Kelly		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address PO Box 605		Amount of Each Disbursement this Period 1504.74
City Waverly	State PA Zip Code 18471	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : SB17-EX3255
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5187.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 161	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. GotPrint.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 7651 N San Fernando Rd		Amount of Each Disbursement this Period 429.86
City Burbank	State CA	
Purpose of Disbursement Palm Cards		Palm Cards
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Spirits Unlimited		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 941 Rt 37 W #1		Amount of Each Disbursement this Period 266.28
City Toms River	State NJ	
Purpose of Disbursement Fundraiser - Beverages		Fundraiser - Beverages
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Capone's Gourmet Pizza & Pasta		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 17 Washington St		Amount of Each Disbursement this Period 750.97
City Toms River	State NJ	
Purpose of Disbursement Fundraiser - Food		Fundraiser - Food
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1447.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 161			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
Lonegan For Congress

Full Name (Last, First, Middle Initial) A. Stencils Online LLC			Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 70 Industrial Park Dr Ste 7			Amount of Each Disbursement this Period \$ 370.40
City Franklin	State NH	Zip Code 03235	
Purpose of Disbursement Signage	Candidate Name		Transaction ID : SB17-EX3285
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:	Category/Type 001		Signage

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

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

SUBTOTAL of Disbursements This Page (optional).....	\$ 370.40
TOTAL This Period (last page this line number only).....	\$ 436287.67

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN5

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
25000 .00 25000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 15 / Y 2014 M 12 / D 31 / Y 2014 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)..... 25000.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN6

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
75000 .00 75000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 29 / Y 2014 M 12 / D 31 / Y 2014 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)..... ▶ 75000.00

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

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN7

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan 50000	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 50000.00
----------------------------------	-----------------------------------	---

TERMS

Date Incurred: M 04 / D 21 / Y 2014
Date Due: M 12 / D 31 / Y 2014
Interest Rate: 0.00 % (apr)
Secured: 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)..... ▶ 50000.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN8

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
40000 .00 40000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 04 / D 29 / Y 2014 M 12 / D 31 / Y 2014 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)..... 40000.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN9

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
6500 .00 6500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 05 / Y 2014 M 12 / D 31 / Y 2014 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)..... ▶ 6500.00

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Lonegan For Congress

Transaction ID : SC10-LN10

LOAN SOURCE Full Name (Last, First, Middle Initial)

Steven Lonegan

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
212 Larch Ave

City State ZIP Code
Bogota NJ 07603

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000 .00 100000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 09 / Y 2014 M 12 / D 31 / Y 2014 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)..... ▶ 100000.00
TOTALS This Period (last page in this line only)..... ▶ 296500.00

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

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Printing Express LLC	Nature of Debt (Purpose): Invoice: Printing
Mailing Address 21 Warehouse Road	
City State Zip Code Harrisonburg VA 22801-9704	

Outstanding Balance Beginning This Period 3815.25	Transaction ID : SD10-INV1685	
Amount Incurred This Period .00	Payment This Period 3815.25	Outstanding Balance at Close of This Period .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alexa Coombs	Nature of Debt (Purpose): Invoice: Transportation
Mailing Address 10524 Rosehaven St #111	
City State Zip Code Fairfax VA 22030	

Outstanding Balance Beginning This Period 269.00	Transaction ID : SD10-INV1869	
Amount Incurred This Period .00	Payment This Period 269.00	Outstanding Balance at Close of This Period .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Association Of NJ Rifle & Pistol Clubs	Nature of Debt (Purpose): Invoice: Advertising
Mailing Address 179-9 Rt 46 #125	
City State Zip Code Rockaway NJ 07866	

Outstanding Balance Beginning This Period 600.00	Transaction ID : SD10-INV1870	
Amount Incurred This Period .00	Payment This Period 600.00	Outstanding Balance at Close of This Period .00

1) SUBTOTALS This Period This Page (optional)	0.00
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

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Base Connect Inc.		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 1155 - 15TH ST NW SUITE 410		
City State	Zip Code	
WASHINGTON DC	20005	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV1871	
<input type="text" value="1442.93"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="1442.93"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Caging Corp		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 504 SHAW ROAD SUITE 217		
City State	Zip Code	
STERLING VA	20166	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV1872	
<input type="text" value="1119.97"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="1119.97"/>	<input type="text" value=".00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Integram		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 22695 Commerce Center Court		
City State	Zip Code	
Dulles VA	20166	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV1877	
<input type="text" value="27031.99"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="9380.60"/>	<input type="text" value="17651.39"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="19094.32"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc - Mgmt		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 1155 - 15TH STREET NW		
City State	Zip Code	
Washington DC	20005	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV1879	
<input type="text" value="1721.10"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="1721.10"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Simpkins Escrow LLC		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 29243 St Just Dr		
City State	Zip Code	
UNIONVILLE VA	22567	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV1880	
<input type="text" value="600.11"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="600.11"/>	<input type="text" value=".00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists Inc - Brokerage		Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 1155 - 15TH STREET NW SUITE 410		
City State	Zip Code	
WASHINGTON DC	20005	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3251	
<input type="text" value="5403.74"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="5403.74"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="7124.84"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Century Data Systems Corp

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Nature of Debt (Purpose):
Invoice: Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3252**
2767.50

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 .00 2767.50

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

Mailing Address PO Box 28960

City State Zip Code
Henrico VA 23228

Nature of Debt (Purpose):
Invoice: Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3253**
10035.60

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 .00 10035.60

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

Mailing Address 504 SHAW ROAD
SUITE 206

City State Zip Code
STERLING VA 20166

Nature of Debt (Purpose):
Invoice: Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3254**
5637.96

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 .00 5637.96

1) SUBTOTALS This Period This Page (optional)	▶	18441.06
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 154 OF 161
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

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

Mailing Address 1900 N CULPEPER STREET

City State Zip Code
ARLINGTON VA 22207

Nature of Debt (Purpose):
Invoice: Fundraising

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3255	
764.12		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	.00	764.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Treasurer Sate Of Virginia

Mailing Address PO Box 1879

City State Zip Code
Richmond VA 23218

Nature of Debt (Purpose):
Invoice: Payroll Taxes

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3038	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
55.42	.00	55.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Treasurer State Of New Jersey

Mailing Address PO Box 111

City State Zip Code
Trenton NJ 08625

Nature of Debt (Purpose):
Invoice: Payroll Taxes

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3039	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
579.94	.00	579.94

1) SUBTOTALS This Period This Page (optional)	1399.48
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

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service	Nature of Debt (Purpose): Invoice: Payroll Taxes
Mailing Address PO Box 931000	
City State Zip Code Louisville KY 40293	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3040	
Amount Incurred This Period <input type="text" value="6246.94"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="6246.94"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arent Fox LLP	Nature of Debt (Purpose): Invoice: Legal Fees
Mailing Address 1675 Broadway	
City State Zip Code New York NY 10019	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3041	
Amount Incurred This Period <input type="text" value="5000.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="5000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Painter Communications	Nature of Debt (Purpose): Invoice: Phone Banks
Mailing Address 75 Maple St #203	
City State Zip Code Conshohocken PA 19428	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3007	
Amount Incurred This Period <input type="text" value="4460.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="4460.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="15706.94"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gretchen Hahn	Nature of Debt (Purpose): Invoice: Fundraising Consulting
Mailing Address 38 E. Ridgewood Avenue #181	
City State Zip Code Ridgewood NJ 07450	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV2983	
Amount Incurred This Period [1039.50]	Payment This Period [.00]	Outstanding Balance at Close of This Period [1039.50]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hierographics	Nature of Debt (Purpose): Invoice: T-Shirts
Mailing Address 51 Woodthrush Trail	
City State Zip Code Medford NJ 08055	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3036	
Amount Incurred This Period [563.20]	Payment This Period [.00]	Outstanding Balance at Close of This Period [563.20]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Constance Murray	Nature of Debt (Purpose): Invoice: See Memo Item Below
Mailing Address 629 Devon Ave	
City State Zip Code Moorestown NJ 08057	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3029	
Amount Incurred This Period [586.28]	Payment This Period [.00]	Outstanding Balance at Close of This Period [586.28]

1) SUBTOTALS This Period This Page (optional)	[2188.98]
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 157 OF 161
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arthur J. Finkelstein & Assoc. Inc.		Nature of Debt (Purpose): Invoice: Strategic Consulting
Mailing Address 16 North Astor Street		
City Irvington	State NY	Zip Code 10533

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3030	
Amount Incurred This Period [5000.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [5000.00]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Compliance Resources LLC		Nature of Debt (Purpose): Invoice: Technical Support
Mailing Address 2100 E Katella Ave #408		
City Anaheim	State CA	Zip Code 92806

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3031	
Amount Incurred This Period [210.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [210.00]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Marketing Strategies		Nature of Debt (Purpose): Invoice: Phone Bank
Mailing Address 3240 Wilson Boulevard Suite 202		
City Arlington	State VA	Zip Code 22201

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3032	
Amount Incurred This Period [724.91]	Payment This Period [.00]	Outstanding Balance at Close of This Period [724.91]

1) SUBTOTALS This Period This Page (optional)	[5934.91]
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 158 OF 161
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AmTrust	Nature of Debt (Purpose): Invoice: Insurance - Workers Compensation
Mailing Address 800 Superior Ave E 21st Fl	
City State Zip Code Cleveland OH 44114	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3033	
Amount Incurred This Period [656.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [656.00]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Birtwhistle & Livingston Inc.	Nature of Debt (Purpose): Invoice: Insurance - Liability
Mailing Address 71 E Palisades Ave	
City State Zip Code Englewood NJ 07631	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3034	
Amount Incurred This Period [732.50]	Payment This Period [.00]	Outstanding Balance at Close of This Period [732.50]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Base Connect Inc.	Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 1155 - 15TH ST NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3060	
Amount Incurred This Period [30605.27]	Payment This Period [.00]	Outstanding Balance at Close of This Period [30605.27]

1) SUBTOTALS This Period This Page (optional)	[31993.77]
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)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Caging Corp	Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 504 SHAW ROAD SUITE 217	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3061
Amount Incurred This Period <input style="width:100%;" type="text" value="936.03"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="936.03"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree Marketing Resources	Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address PO Box 28960	
City State Zip Code Henrico VA 23228	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3063
Amount Incurred This Period <input style="width:100%;" type="text" value="17912.52"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="17912.52"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donor Precision LLC	Nature of Debt (Purpose): Invoice: Fundraising
Mailing Address 1900 N CULPEPER STREET	
City State Zip Code ARLINGTON VA 22207	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3065
Amount Incurred This Period <input style="width:100%;" type="text" value="1176.61"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1176.61"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="20025.16"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

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

Integram

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 22695 Commerce Center Court

City State Zip Code
Dulles VA 20166

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3066

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Legacy Lists Inc - Mgmt

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 1155 - 15TH STREET NW

City State Zip Code
Washington DC 20005

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3068

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

Simpkins Escrow LLC

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 29243 St Just Dr

City State Zip Code
UNIONVILLE VA 22567

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3069

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Lonegan For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Century Data Systems Corp

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3217

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 504 SHAW ROAD
SUITE 206

City State Zip Code
STERLING VA 20166

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3256

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
Legacy Lists Inc - Brokerage

Nature of Debt (Purpose):
Invoice: Fundraising

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3257

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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