

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.   
**THOMAS MASSIE FOR CONGRESS**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)  
    
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER**   
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
STATE DISTRICT

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

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

5. Covering Period  through

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **BROGHAMER, KEVIN, , ,**

Signature of Treasurer **BROGHAMER, KEVIN, , ,** *[Electronically Filed]* Date

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**THOMAS MASSIE 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))....	21606.00	218043.30
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	21606.00	217343.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	16524.04	285455.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	600.41	1834.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15923.63	283620.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	263133.34	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**THOMAS MASSIE FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	107903.20
(ii) Unitemized.....	606.00	13940.10
(iii) TOTAL of contributions from individuals ▶	606.00	121843.30
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	21000.00	96200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	21606.00	218043.30
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	9500.00	32343.79
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	600.41	1834.46
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	31706.41	252221.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 31

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16524.04	285455.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	- 2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	700.00
21. OTHER DISBURSEMENTS .....	5000.00	10550.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	21524.04	296705.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	252950.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31706.41
25. SUBTOTAL (add Line 23 and Line 24).....	284657.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21524.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	263133.34

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

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

FOR LINE NUMBER: PAGE 5 OF 31  
(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)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRUEGGEMANN, JAMES, E., ,**  
Mailing Address 12665 MCCOYS FORK ROAD

City: WALTON State: KY Zip Code: 41094

FEC ID number of contributing federal political committee: C

Name of Employer: BAVARIAN Occupation: PRESIDENT

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 03 / 31 / 2018  
Transaction ID : **ABF27A19182224FF0B31**

Amount of Each Receipt this Period: 1000.00

Memo Item  
SEE REATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**BRUEGGEMANN, JAMES, E., ,**  
Mailing Address 12665 MCCOYS FORK ROAD

City: WALTON State: KY Zip Code: 41094

FEC ID number of contributing federal political committee: C

Name of Employer: BAVARIAN Occupation: PRESIDENT

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 05 / 31 / 2018  
Transaction ID : **A55ECAE2BD7D54CD794A**

Amount of Each Receipt this Period: - 800.00

Memo Item  
REATTRIBUTION FROM

**C.** Full Name (Last, First, Middle Initial)  
**BRUEGGEMANN, MARIA, S., ,**  
Mailing Address 12665 MCCOYS FORK ROAD

City: WALTON State: KY Zip Code: 41094

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 800.00

Date of Receipt: 05 / 31 / 2018  
Transaction ID : **A4B7049C177684ED68E4**

Amount of Each Receipt this Period: 800.00

Memo Item  
REATTRIBUTION TO

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00

**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 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AIRPORTS COUNCIL INTERNATIONAL - NORTH AMERICA PAC**

Mailing Address 1615 L ST NW  
STE 300

City WASHINGTON State DC Zip Code 20036-5655

FEC ID number of contributing federal political committee. **C** C00341800

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 18 / 2018

Transaction ID : **A3CEA76E45C954EADBAB**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BAKERS ASSOCIATION PAC**

Mailing Address 601 PENNSYLVANIA AVE NW  
STE 230

City WASHINGTON State DC Zip Code 20004-2629

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

Transaction ID : **ACEF0CF3FCA964097931**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BRUNSWICK CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1 N FIELD COURT

City LAKE FOREST State IL Zip Code 60045

FEC ID number of contributing federal political committee. **C** C00110262

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2018

Transaction ID : **AC719C8DE4C954CEBBE0**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 7 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVENUE NW  
SUITE 560

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 18 / 2018

**Transaction ID : A9E898DB80B9A4A81860**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GOOGLE INC.NETPAC**

Mailing Address 25 MASSACHUSETTS AVE NW  
FL 9

City WASHINGTON	State DC	Zip Code 20001-1430
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FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2018

**Transaction ID : AE140D95E95A54948B17**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**INGRAM BARGE COMPANY PAC**

Mailing Address 4400 HARDING PIKE

City NASHVILLE	State TN	Zip Code 37205
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FEC ID number of contributing federal political committee. **C** C00364471

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : AC52CAE0E8D194796B04**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> 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 8 OF 31
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Mailing Address 2901 TELESTAR COURT

City FALLS CHURCH	State VA	Zip Code 22042
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FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer	Occupation
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 22 / 2018

**Transaction ID : A74ADEF79A27E4216869**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL CONFECTIONERS ASSOCIATION OF THE UNITED STATES INC PAC**

Mailing Address 1101 30TH STREET NW  
SUITE 200

City WASHINGTON	State DC	Zip Code 20007
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FEC ID number of contributing federal political committee. **C** C00003855

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 18 / 2018

**Transaction ID : AE35A0B448F4C4892A68**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address 1605 KING STREET

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00089458

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : A656834427CDC45DA9D9**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7500.00
<b>TOTAL</b> 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 9 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TOYOTA MOTOR NORTH AMERICA, INC PAC (TOYOTA/LEXUS PAC)**

Mailing Address 601 13TH ST NW  
STE 910S

City WASHINGTON	State DC	Zip Code 20005-3800
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FEC ID number of contributing federal political committee. **C** C00542365

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : AFBDB59C849DC4DF2841**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UNITED PARCEL SERVICE INC. PAC (UPS PAC)**

Mailing Address 55 GLENLAKE PKWY

City ATLANTA	State GA	Zip Code 30328-3474
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FEC ID number of contributing federal political committee. **C** C00064766

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : A968CA48A7E244B57909**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOMWORKS VICTORY 2018**

Mailing Address PO BOX 26141

City: ALEXANDRIA State: VA Zip Code: 22314

FEC ID number of contributing federal political committee: **C** C00673962

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 10 / 2018

**Transaction ID : A8692D4052A304B619E6**

Amount of Each Receipt this Period  
7000.00

Memo Item  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

Mailing Address PO BOX 75760

City: WASHINGTON State: DC Zip Code: 20013

FEC ID number of contributing federal political committee: **C** C00573550

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
16576.43

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 17 / 2018

**Transaction ID : A48ED5E76C06D4ED5AD4**

Amount of Each Receipt this Period  
468.07

Memo Item  
TRANSFER

**C.** Full Name (Last, First, Middle Initial)  
**SPANNO, PETER, F., ,**

Mailing Address 4001 N OCEAN BOULEVARD  
APT. 304

City: GULF STREAM State: FL Zip Code: 33483

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

Name of Employer: Occupation:  
RETIRED RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 09 / 2018

**Transaction ID : AC994C600E4214116849**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 11 OF 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BAUMGARN, BRUCE, , ,**

Mailing Address 2404 NORTHEAST PARK DRIVE

City GRIMES State IA Zip Code 50111

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 09 / 2018

Transaction ID : AAC9C0FF9993E4E95973

Amount of Each Receipt this Period  
500.00

Memo Item

TRANSFER

**B.** Full Name (Last, First, Middle Initial)  
**BAUMGARN, BARB, , ,**

Mailing Address 2404 NORTHEAST PARK DRIVE

City GRIMES State IA Zip Code 50111

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 09 / 2018

Transaction ID : A367C8078C20840CC891

Amount of Each Receipt this Period  
500.00

Memo Item

TRANSFER

**C.** Full Name (Last, First, Middle Initial)  
**SPANO, CATHY, D., ,**

Mailing Address 4001 N OCEAN BOULEVARD  
APT. 304

City GULF STREAM State FL Zip Code 33483

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 11 / 2018

Transaction ID : A137390F20B334CB3938

Amount of Each Receipt this Period  
1000.00

Memo Item

TRANSFER

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 12 OF 31
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KAKATY, JOSEPH, , ,**

Mailing Address 9804 MOON VALLEY PLACE

City LAS VEGAS	State NV	Zip Code 89134
-------------------	-------------	-------------------

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

Name of Employer GALAXY MEDIA GROUP LLC	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2018

Transaction ID : **A947FB599F2B1447991A**

Amount of Each Receipt this Period  
1000.00

Memo Item

TRANSFER

**B.** Full Name (Last, First, Middle Initial)  
**AGLIALORO, JOHN, J., ,**

Mailing Address 182 TAVISTOCK LANE

City HADDONFIELD	State NJ	Zip Code 08033
---------------------	-------------	-------------------

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

Name of Employer UM HOLDINGS LTD	Occupation EXECUTIVE
-------------------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2018

Transaction ID : **A89368C925A634D43A33**

Amount of Each Receipt this Period  
2500.00

Memo Item

TRANSFER

**C.** Full Name (Last, First, Middle Initial)  
**HILL, ELIZABETH, C., ,**

Mailing Address 685 LAKE DR

City VERO BEACH	State FL	Zip Code 32963
--------------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 09 / 2018

Transaction ID : **A21FC6E89C4A945DC96D**

Amount of Each Receipt this Period  
500.00

Memo Item

TRANSFER

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	0.00
<b>TOTAL</b> 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 13 OF 31
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOMWORKS VICTORY 2018**

Mailing Address PO BOX 26141

City: ALEXANDRIA State: VA Zip Code: 22314

FEC ID number of contributing federal political committee: **C** C00673962

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 9500.00

Date of Receipt: 05 / 10 / 2018

Transaction ID : **A9156500C6BB045589CB**

Amount of Each Receipt this Period: 2500.00

Memo Item  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B.** Full Name (Last, First, Middle Initial)  
**CARTER, JOAN, P, ,**

Mailing Address 182 TAVISTOCK LANE

City: HADDONFIELD State: NJ Zip Code: 08033

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

Name of Employer: UM HOLDINGS Occupation: EXECUTIVE

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5200.00

Date of Receipt: 04 / 09 / 2018

Transaction ID : **AFEDCEF8FE5A944FD84E**

Amount of Each Receipt this Period: 2500.00

Memo Item  
TRANSFER

**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:

Amount of Each Receipt this Period:

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9500.00

# 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 31	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHURCHILL DOWNS INCORPORATED**

Mailing Address 600 N HURSTBOURNE PARKWAY  
SUITE 400

City LOUISVILLE	State KY	Zip Code 40222
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 18 / 2018

**Transaction ID : A29238CBD20664F8281D**

Amount of Each Receipt this Period

Memo Item  
**REFUND: EVENT TICKETS**

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
/  /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
/  /

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="454.15"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="454.15"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018		
Mailing Address 205 PENNSYLVANIA AVENUE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1560.00		
Purpose of Disbursement COMPLIANCE SOFTWARE		Category/ Type 001	Transaction ID : <b>BD268AE189EB749BDAFB</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BEST BUY</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2018		
Mailing Address 7601 PENN AVENUE S			FEC Identification Number C		
City MINNEAPOLIS	State MN	Zip Code 55423	Amount of Each Disbursement this Period 52.94		
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : <b>B83BD8C18A8F34D3692C</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. BROGHAMER CONSULTING LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018		
Mailing Address 411 WALNUT ST PMB 300			FEC Identification Number C		
City GREEN COVE SPRINGS	State FL	Zip Code 32043-3443	Amount of Each Disbursement this Period 2022.63		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : <b>B665E54B844C4404CAF9</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3635.57
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2018
Mailing Address 411 WALNUT ST PMB 300		FEC Identification Number C
City GREEN COVE SPRINGS	State FL	Zip Code 32043-3443
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2125.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>BD158CF24869947B8AA6</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CANDO POLITICS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018
Mailing Address 20 W 11TH STREET SUITE 200		FEC Identification Number C
City COVINGTON	State KY	Zip Code 41011
Purpose of Disbursement WEBSITE DEVELOPMENT/CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>B06EEC8538F3C49E39AC</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CANDO POLITICS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2018
Mailing Address 20 W 11TH STREET SUITE 200		FEC Identification Number C
City COVINGTON	State KY	Zip Code 41011
Purpose of Disbursement WEBSITE HOSTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>BF4DA4865CCA64413A43</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2325.05
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2018	
Mailing Address 300 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 129.28	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : B681B00C49C144F56A5F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018	
Mailing Address 300 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 41.13	
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : B40B2D03CDAFA4B7AB51	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CHASE BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018	
Mailing Address 11 S GRAND AVENUE			FEC Identification Number C	
City FORT THOMAS	State KY	Zip Code 41075	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement BANK FEE		Category/ Type 001	Transaction ID : BDE24470B0D4648DEAC6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	220.41
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOGOAIR.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50		FEC Identification Number C
City ITASCA	State IL	Zip Code 60143
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 4.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B1ABA266EFC74323A71 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GOGOAIR.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2018
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50		FEC Identification Number C
City ITASCA	State IL	Zip Code 60143
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 7.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BC547F12AFF2E4BB4ACA <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GOGOAIR.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50		FEC Identification Number C
City ITASCA	State IL	Zip Code 60143
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 4.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BA3C241BACC1B402E815 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOGOAIR.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018		
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50			FEC Identification Number C		
City ITASCA	State IL	Zip Code 60143	Amount of Each Disbursement this Period 4.95		
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B62169B5881674A93A14		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. GOGOAIR.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2018		
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50			FEC Identification Number C		
City ITASCA	State IL	Zip Code 60143	Amount of Each Disbursement this Period 4.95		
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B09CAC654BCA94F3381F		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. GOGOAIR.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018		
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50			FEC Identification Number C		
City ITASCA	State IL	Zip Code 60143	Amount of Each Disbursement this Period 4.95		
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B85E70987AE2E474686A		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOGOAIR.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018	
Mailing Address 1250 N ARLINGTON HEIGHTS ROAD SUITE 50			FEC Identification Number C	
City ITASCA	State IL	Zip Code 60143	Amount of Each Disbursement this Period 4.95	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B77070D87D7094E8A848	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. HAMMOND &amp; ASSOCIATES</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018	
Mailing Address P.O. BOX 368			FEC Identification Number C	
City FALLS CHURCH	State VA	Zip Code 22040	Amount of Each Disbursement this Period 3100.00	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type 001	Transaction ID : B7ECBF3B6A6A843E3978	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. HAMMOND &amp; ASSOCIATES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2018	
Mailing Address P.O. BOX 368			FEC Identification Number C	
City FALLS CHURCH	State VA	Zip Code 22040	Amount of Each Disbursement this Period 3100.00	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type 001	Transaction ID : B789F04561D4C45FD99A	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6204.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOSTGATOR</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2018	
Mailing Address 5005 MITCHELLDALE STREET SUITE 100			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77092	Amount of Each Disbursement this Period 11.95	
Purpose of Disbursement WEBSITE HOSTING		Category/ Type 001	Transaction ID : B9CF05AEDCA0D42588CA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. KENTON COUNTY REPUBLICAN PARTY</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018	
Mailing Address 2030 EDENDERRY DRIVE			FEC Identification Number C	
City FT MITCHELL	State KY	Zip Code 41017	Amount of Each Disbursement this Period 550.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : B7F9B3D617D7B4AF1AC7	
Candidate Name KENTON COUNTY REPUBLICAN PARTY		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2018	
Mailing Address 512 MEANS STREET NW SUITE 404			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30318	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : BB4127ADEC3B842DC905	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	636.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

**A. MAILCHIMP**

Full Name (Last, First, Middle Initial)

Mailing Address 512 MEANS STREET NW  
SUITE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement SOFTWARE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 06 / 15 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 75.00

Transaction ID : BEB53CDDDC3324FAE9A2

Memo Item

**B. MATSUTAKE SUSHI**

Full Name (Last, First, Middle Initial)

Mailing Address 2401 S SMITH BLVD

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 05 / 09 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 36.41

Transaction ID : B71F69FBECED04BF6A9C

Memo Item

**C. MIYAKO**

Full Name (Last, First, Middle Initial)

Mailing Address 2511 RITCHIE STREET

City CRESCENT SPRINGS State KY Zip Code 41017

Purpose of Disbursement FOOD/BEVERAGE Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 05 / 22 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 109.57

Transaction ID : B63896403A72D4769B69

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 220.98

**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 23 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PARIS LAS VEGAS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2018	
Mailing Address 3655 S LAS VEGAS BLVD			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89109-4345	Amount of Each Disbursement this Period 146.26	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : B7DE2BB119FEE4CD1AA4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PARIS LAS VEGAS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2018	
Mailing Address 3655 S LAS VEGAS BLVD			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89109-4345	Amount of Each Disbursement this Period 146.26	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : B42362A5F37464A3FB27	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PARIS LAS VEGAS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2018	
Mailing Address 3655 S LAS VEGAS BLVD			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89109-4345	Amount of Each Disbursement this Period 146.26	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : BE9F792A8819D4196ADB	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	438.78
<b>TOTAL</b> 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 24 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PENDELTON COUNTY REPUBLICAN PARTY</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018		
Mailing Address 1136 GARVEY RD			FEC Identification Number C		
City BUTLER	State KY	Zip Code 41006-9061	Amount of Each Disbursement this Period 120.00		
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : B538A7CC3E4EC4B70B2E		
Candidate Name PENDELTON COUNTY REPUBLICAN PARTY		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018		
Mailing Address 2702 LOVE FIELD DR			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 535.96		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : B56FA63C5863C4931AEC		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018		
Mailing Address 2702 LOVE FIELD DR			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 294.98		
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : BFF31594888AA40BA992		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	950.94
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018	
Mailing Address 2702 LOVE FIELD DR			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 260.98	
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : B8CE2FE8FABA44A9C852	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018	
Mailing Address 2702 LOVE FIELD DR			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 337.98	
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : B58661978C6474859905	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018	
Mailing Address 2702 LOVE FIELD DR			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75235-1908	Amount of Each Disbursement this Period 294.98	
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : B8A25B21025754BCDA0C	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	893.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2018		
Mailing Address 140 2ND STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 2.20		
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type 001	Transaction ID : BF73B01875D3846C5914		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. STRIPE</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2018		
Mailing Address 140 2ND STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 1.03		
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type 001	Transaction ID : B0B776C6439C7481DA48		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. TORTILLA COAST</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018		
Mailing Address 400 1ST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 243.51		
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 001	Transaction ID : BB7F06204DFEA4AC481C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	246.74
<b>TOTAL</b> 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 27 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TWO BY 2000, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2018	
Mailing Address PO BOX 51			FEC Identification Number C	
City ASHLAND	State KY	Zip Code 41105	Amount of Each Disbursement this Period 300.02	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : B67A815B8C61342E4B78	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018	
Mailing Address 405 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 21.09	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B2D2194D6728E471E8EE	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018	
Mailing Address 405 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 7.66	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : BE2CDD7C7F8464802A57	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	328.77
<b>TOTAL</b> 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 28 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2018	
Mailing Address 405 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 7.63	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : BF3A5548C5541421EA82	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2018	
Mailing Address 405 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 15.76	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B06DA69079F6544B9BAD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018	
Mailing Address 405 HOWARD STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 8.10	
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B3585B7F5C7FC4F54B7A	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	31.49
<b>TOTAL</b> 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 29 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018		
Mailing Address 405 HOWARD STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 10.49		
Purpose of Disbursement TRAVEL		Category/ Type 001	Transaction ID : B85873C02C0CC4A5DAD3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. US POST OFFICE</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2018		
Mailing Address 475 LENFANT PLAZA SW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20260	Amount of Each Disbursement this Period 2.95		
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : B83EC7260604D40FDA77		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13.44
<b>TOTAL</b> This Period (last page this line number only).....▶	16180.75

**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 30 OF 31	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BLUM FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2018
Mailing Address 2728 ASBURY RD STE 400		FEC Identification Number C 00543926
City DUBUQUE	State IA	Zip Code 52001-2969
Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/Type	
Candidate Name <b>BLUM, RODNEY, , ,</b>	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 01	Transaction ID : <b>BB6C6CBF1B40946ABA95</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BRIGHT FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2018
Mailing Address PO BOX 170583		FEC Identification Number C 00673525
City SPARTANBURG	State SC	Zip Code 29301
Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/Type	
Candidate Name <b>BRIGHT, LEE, , ,</b>	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PRIMARY RUNOFF	
State: SC District: 04	Transaction ID : <b>BADF6D77F4C214ECEA39</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE BRAT INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2018
Mailing Address PO BOX 5094		FEC Identification Number C 00554949
City GLEN ALLEN	State VA	Zip Code 23058-5094
Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/Type	
Candidate Name <b>BRAT, DAVID, ALAN, ,</b>	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 07	Transaction ID : <b>B7DC9296BA59E4E988A9</b> <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> 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)  
17 18 19a 19b  
20a 20b 20c  21

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NAME OF COMMITTEE (In Full)  
**THOMAS MASSIE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. RON DESANTIS FOR GOVERNOR**

Mailing Address 1563 CAPITAL CIR SE  
# 44

City TALLAHASSEE State FL Zip Code 32301-5115

Purpose of Disbursement POLITICAL CONTRIBUTION  011 Category/Type

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 19 / 2018

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1000.00

Transaction ID : B820D1A4368C146C39FB

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

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

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00