

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

BRIAN MAST FOR CONGRESS

ADDRESS (number and street)

2600 S DOUGLAS RD STE 900

Check if different
than previously
reported. (ACC)

CORAL GABLES

FL

33134-6149

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00579896

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

18

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y
08 / 30 / 2016in the
State of

FL

(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2016

through

M M / D D / Y Y Y Y
08 / 10 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

RIESCO, JOSE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

RIESCO, JOSE, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
12 / 08 / 2016

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
BRIAN MAST FOR CONGRESS

Report Covering the Period: From:

M M / D D / Y Y Y Y
 07 01 2016

To:

M M / D D / Y Y Y Y
 08 10 2016

	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))....	253122.15	1249211.81
(b) Total Contribution Refunds (from Line 20(d))	0.00	17200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	253122.15	1232011.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	422345.47	1170526.27
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	601.22
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	422345.47	1169925.05
8. Cash on Hand at Close of Reporting Period (from Line 27)	174485.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9499.36	

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BRIAN MAST FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2016

To:

M M / D D / Y Y Y Y
08 10 2016

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).....**

84258.00

623502.21

(ii) Unitemized.....

155714.15

583499.60

(iii) TOTAL of contributions from individuals ▶

239972.15

1207001.81

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

13150.00

42210.00

(d) The Candidate.....

0.00

0.00

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

253122.15

1249211.81

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

10448.98

112398.95

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

601.22

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

0.00

0.00

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

263571.13

1362211.98

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 175

II. DISBURSEMENTS**COLUMN A
Total This Period****COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

422345.47

1170526.27

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

17200.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

17200.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

422345.47

1187726.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

333260.05

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

263571.13

25. SUBTOTAL (add Line 23 and Line 24).....

596831.18

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

422345.47

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

174485.71

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 175

☒ 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)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALBRITTON, JANIS S, , ,
Mailing Address 9051 SHORT CHIP CIR

City State Zip Code
PORT ST LUCIE FL 34986

FEC ID number of contributing
federal political committee.

C

Name of Employer
DR. JANIS S. ALBRITTON MD

Occupation
PODIATRIST

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.66869

Amount of Each Receipt this Period

76.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALEMBIK, STEVEN, , ,
Mailing Address 5420 NORTH OCEAN DR. APT. 1502

City State Zip Code
RIVIERA BEACH FL 33404

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMA COMMUNICATIONS

Occupation
PARTNER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.68836

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMANTI, ANTHONY E, , ,
Mailing Address 42 MAGNOLIA TER

City State Zip Code
WESTFIELD MA 01085

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67016

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

426.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANACLERIO SR, MICHAEL, , ,
Mailing Address 306 COLLETON AVE SE

City AIKEN	State SC	Zip Code 29801
---------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2016

Transaction ID : SA11AI.63471

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANACLERIO SR, MICHAEL, , ,
Mailing Address 306 COLLETON AVE SE

City AIKEN	State SC	Zip Code 29801
---------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11AI.65802

Amount of Each Receipt this Period

90.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANDERSON, BYRON H, , ,
Mailing Address 2021 HUNTINGTON LN

City FORT WORTH	State TX	Zip Code 76110
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.68152

Amount of Each Receipt this Period

75.00

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

240.00

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASHLOCK, ERICA, , ,
Mailing Address 2049 VENETIAN WAY

City WINTER PARK	State FL	Zip Code 32789
---------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.61590

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AWERKAMP, ROBERT J., , ,
Mailing Address PO BOX 37

City BELVUE	State KS	Zip Code 66407
----------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
ONYX COLLECTIONOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : SA11AI.61584

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BABB, AVON LEE, , ,
Mailing Address 1500 E COLLEGE WAY STE 448

City MOUNT VERNON	State WA	Zip Code 98273
----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : SA11AI.65171

Amount of Each Receipt this Period

500.00

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

4200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARNES, CONSTANCE C, , ,

Mailing Address 244 LIBERTY ST

City WARSAW	State NY	Zip Code 14569
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 19 2016

Transaction ID : SA11AI.65571

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARRINGHAUS, ROSELYN M, , ,

Mailing Address 310 E STATE ST # A

City UNION	State MO	Zip Code 63084
---------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64891

Amount of Each Receipt this Period

25.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BASELEY, MARJORIE A, , ,

Mailing Address 1325 S LEEBRICK ST

City BURLINGTON	State IA	Zip Code 52601
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2016

Transaction ID : SA11AI.62706

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

110.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

BASELEY, MARJORIE A, , ,

A.

Mailing Address 1325 S LEEBRICK ST

City

BURLINGTON

State

IA

Zip Code

52601

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 02 2016

Transaction ID : SA11AI.67514

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

BASELEY, MARJORIE A, , ,

B.

Mailing Address 1325 S LEEBRICK ST

City

BURLINGTON

State

IA

Zip Code

52601

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2016

Transaction ID : SA11AI.68205

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

BEAVER, HELEN G, , ,

C.

Mailing Address 1737 SENECA RD

City

LAWTONS

State

NY

Zip Code

14091

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2016

Transaction ID : SA11AI.62478

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BECKER, JUDITH R, , ,
Mailing Address 21180 OAKLEY COURT

City State Zip Code
Boca Raton FL 33433

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
SELF EMPLOYED COMMERCIAL REAL ESTATE INVESTOR

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2016

Transaction ID : SA11AI.61710

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BELDING, MAXWELL M, , ,
Mailing Address 30 BOKUM RD APT 308

City State Zip Code
ESSEX CT 06426

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63149

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BELLUOMINI, ALAN J, , ,
Mailing Address 2319 RIVERS BEND CIR

City State Zip Code
LIVERMORE CA 94550

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 11 2016

Transaction ID : SA11AI.63498

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) BORUN, RUTH M, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2016		
Mailing Address 344 S CLIFFWOOD AVE			Transaction ID : SA11AI.63962		
City LOS ANGELES	State CA	Zip Code 90049	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00			
B. Full Name (Last, First, Middle Initial) BOYETTE, ELOISE C, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2016		
Mailing Address 3 TROTTER CT			Transaction ID : SA11AI.63785		
City DAYTONA BEACH	State FL	Zip Code 32119	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 235.00			
C. Full Name (Last, First, Middle Initial) BRADLEY, DAMARIS R, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 02 / 2016		
Mailing Address 6542 N HILLSIDE DR			Transaction ID : SA11AI.67302		
City PARADISE VALLEY	State AZ	Zip Code 85253	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer HOMEMAKER		Occupation HOMEMAKER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			200.00		
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 175

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRADSHAW, MILTON T, , ,

Mailing Address 1561 RANSOM RD

City RIVERSIDE	State CA	Zip Code 92506
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 27 2016

Transaction ID : SA11AI.66478

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRAUER, BEVERLY C, , ,

Mailing Address 1652 SE SKYLINE DR

City SANTA ANA	State CA	Zip Code 92705
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 19 2016

Transaction ID : SA11AI.65517

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

Mailing Address 1652 SE SKYLINE DR

City SANTA ANA	State CA	Zip Code 92705
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 312.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 26 2016

Transaction ID : SA11AI.66367

Amount of Each Receipt this Period

52.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

177.00

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

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

A. Full Name (Last, First, Middle Initial)
BRAUN, DONNA M, , ,

Mailing Address 2460 KINGS LAKE BLVD

City NAPLES	State FL	Zip Code 34112
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.68247

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 3 SE TUSCON LN.

City STUART	State FL	Zip Code 34996
----------------	-------------	-------------------

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

Name of Employer SOUTH FLORIDA ORTHOPEDICS	Occupation PHYSICIAN
---	-------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11AI.61868

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BREWER, EZMA K, , ,

Mailing Address 1914 122ND AVE SE

City BELLEVUE	State WA	Zip Code 98005
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : SA11AI.65527

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

1450.00

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

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRINCKMAN, DONALD W, , ,
Mailing Address 5615 HAMILTON RD

City State Zip Code
WOODSTOCK IL 60098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 25 2016

Transaction ID : SA11AI.65991

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRISTOR JR, WILLIAM B, , ,
Mailing Address 3621 BLUE HILL CT

City State Zip Code
ELLCOTT CITY MD 21042

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 19 2016

Transaction ID : SA11AI.65462

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRISTOR JR, WILLIAM B, , ,
Mailing Address 3621 BLUE HILL CT

City State Zip Code
ELLCOTT CITY MD 21042

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 02 2016

Transaction ID : SA11AI.67446

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

425.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRITTON, BEATRICE T, , ,

Mailing Address PO BOX 2327

City SOUTH HAMILTON	State MA	Zip Code 01982
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2016

Transaction ID : SA11AI.64595

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRITTON, BEATRICE T, , ,

Mailing Address PO BOX 2327

City SOUTH HAMILTON	State MA	Zip Code 01982
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.68490

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BUESCHEL, HOWARD A, , ,

Mailing Address 107 UPPER FERRY RD

City EWING	State NJ	Zip Code 08628
---------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 12 2016

Transaction ID : SA11AI.64106

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

400.00

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BURNEY, KATHRYN G, , ,
Mailing Address 9804 NICHOLAS ST

City State Zip Code
OMAHA NE 68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.66648

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BURT, WILLIAM F, , ,
Mailing Address 1 HARVEST CIR UNIT 3

City State Zip Code
LINCOLN MA 01773

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.66460

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CARLSON JR, RUDOLPH E, , ,
Mailing Address 100 SCENIC HWY APT 27

City State Zip Code
LOOKOUT MTN TN 37350

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2016

Transaction ID : SA11AI.64413

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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 PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARLSON JR, RUDOLPH E, , ,**A.** Mailing Address 100 SCENIC HWY APT 27

City

LOOKOUT MTN

State

TN

Zip Code

37350

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

Transaction ID : SA11AI.66651

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CARLSON JR, RUDOLPH E, , ,**B.** Mailing Address 100 SCENIC HWY APT 27

City

LOOKOUT MTN

State

TN

Zip Code

37350

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

302.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

Transaction ID : SA11AI.68259

Amount of Each Receipt this Period

2.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CARMICHAEL, OPAL I, , ,**C.** Mailing Address 8103 QUEBEC DR

City

SAN ANTONIO

State

TX

Zip Code

78239

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

Transaction ID : SA11AI.67236

Amount of Each Receipt this Period

100.00

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

152.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

CASTILLO, JORGE, , ,**A.**

Mailing Address 200 GREENWOOD DRIVE

City

KEY BISCAIYNE

State

FL

Zip Code

33149

FEC ID number of contributing
federal political committee.

C

Name of Employer

IANDJCCORP

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		27		2016

Transaction ID : SA11AI.61872

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CAVENDER, ANN E, , ,**B.**

Mailing Address 1242 CROWN RIDGE DR

City

PRESCOTT

State

AZ

Zip Code

86301

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		19		2016

Transaction ID : SA11AI.65590

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHALIFOUR, LEE H, , ,**C.**

Mailing Address 131 COLONIAL ST SE

City

PORT CHARLOTTE

State

FL

Zip Code

33952

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2016

Transaction ID : SA11AI.62940

Amount of Each Receipt this Period

100.00

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

1100.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHALIFOUR, LEE H, , ,

Mailing Address 131 COLONIAL ST SE

City PORT CHARLOTTE	State FL	Zip Code 33952
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.68517

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CIOFFI, RALPH R, , ,

Mailing Address 3595 GIN LN

City NAPLES	State FL	Zip Code 34102
----------------	-------------	-------------------

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

Name of Employer CORAL	Occupation INVESTOR
---------------------------	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 27 / 2016

Transaction ID : SA11AI.66458

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COBB, ELEANOR L, , ,

Mailing Address 131 S VISTA ST

City LOS ANGELES	State CA	Zip Code 90036
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : SA11AI.67764

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

600.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) COLLINS, ALICE M, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 18 / 2016	
Mailing Address 23907 76TH AVE W			Transaction ID : SA11AI.65000	
City EDMONDS	State WA	Zip Code 98026	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
B. Full Name (Last, First, Middle Initial) COMENSKY JR, WILLIAM, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2016	
Mailing Address PO BOX 1030			Transaction ID : SA11AI.66086	
City JUPITER	State FL	Zip Code 33468	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) COMER, GENE L, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 27 / 2016	
Mailing Address 879 FM 220			Transaction ID : SA11AI.66434	
City ALTO	State TX	Zip Code 75925	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			700.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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

A. Full Name (Last, First, Middle Initial)
COMER, GENE L, , ,

Mailing Address 879 FM 220

City ALTO	State TX	Zip Code 75925
--------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67698

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 1552 SUNSET VIEW CIRCLE

City APOPKA	State FL	Zip Code 32703
----------------	-------------	-------------------

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

Name of Employer POA	Occupation PROSTHETIC PRATITIONER
-------------------------	--------------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61886

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COROTHERS, JOHN M, , ,

Mailing Address 47617 181ST ST

City CLEAR LAKE	State SD	Zip Code 57226
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2016

Transaction ID : SA11AI.62617

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COROTHERS, JOHN M, , ,

Mailing Address 47617 181ST ST

City CLEAR LAKE	State SD	Zip Code 57226
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 19 2016

Transaction ID : SA11AI.65433

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COROTHERS, JOHN M, , ,

Mailing Address 47617 181ST ST

City CLEAR LAKE	State SD	Zip Code 57226
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67414

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

Mailing Address POMBOX 12907

City RENO	State NV	Zip Code 89510
--------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 04 2016

Transaction ID : SA11AI.61946

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

450.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

CORRAO, LUD JEROME, , ,**A.**

Mailing Address 2462 E LAKE RIDGE SHRS

City
RENOState
NVZip Code
89519FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11AI.65858

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

Crain, Dotty, , ,**B.**

Mailing Address 2224 Willow Grove Way

City
The VillagesState
FLZip Code
32162FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.61580

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CRIPPEN, STAN C, , ,**C.**

Mailing Address 7929 SADDLEBROOK DR

City
PORT SAINT LUCIEState
FLZip Code
34986FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		12		2016

Transaction ID : SA11AI.64045

Amount of Each Receipt this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CROCKER, GARY Z, , ,
Mailing Address 43 SW PEPPER TREE LN

City State Zip Code
TOPEKA KS 66611

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

07 12 2016

Transaction ID : SA11AI.63678

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CRUMPTON, ESTHER, , ,
Mailing Address 999 E 1ST AVE UNIT 201

City State Zip Code
BROOMFIELD CO 80020

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

07 27 2016

Transaction ID : SA11AI.66496

Amount of Each Receipt this Period

107.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULLY, MARCIA, , ,
Mailing Address 6200 SPRING LAKE TERRACE

City State Zip Code
Ft Pierce FL 34951

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

07 01 2016

Transaction ID : SA11AI.61707

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

657.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.**CULNEN, DANIEL J, , ,**

Mailing Address 73 ROXITICUS RD

City

FAR HILLS

State

NJ

Zip Code

07931

FEC ID number of contributing
federal political committee.

C

Name of Employer
C & H ASSOCIATES

Occupation

CONSTRUCTION CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2016

Transaction ID : SA11AI.66897

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.**D'EPFANIO, JUDY, , ,**

Mailing Address 220 1ST ST APT 1

City

SEAL BEACH

State

CA

Zip Code

90740

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2016

Transaction ID : SA11AI.66976

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

C.**DAVIS, JAMES, , ,**

Mailing Address 4727 WILSHIRE BOULEVARD #302

City

LOS ANGELES

State

CA

Zip Code

90010

FEC ID number of contributing
federal political committee.

C

Name of Employer
PMIC

Occupation

PUBLISHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2016

Transaction ID : SA11AI.61984

Amount of Each Receipt this Period

1000.00

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

1300.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DECKER, HELEN R, , ,

Mailing Address PO BOX 170009

City ARLINGTON	State TX	Zip Code 76003
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
700.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2016

Transaction ID : SA11AI.62627

Amount of Each Receipt this Period

250.50

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DELANEY, WILLIAM H., , ,

Mailing Address 285 PORTO VECCHIO WAY

City PALM BEACH GARDENS	State FL	Zip Code 33418
----------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2016

Transaction ID : SA11AI.61688

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 112 ABNDANCE DIVE

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.61582

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

1750.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEL TORO, PETER, , ,

Mailing Address 236 NE ABACA WAY

City
 JENSEN BEACH

State
 FL

Zip Code
 34957

FEC ID number of contributing
federal political committee.

C

Name of Employer
 ROYAL GREEN LLC

Occupation
 OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 29 2016

Transaction ID : SA11AI.61669

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEVENISH, DONNA L, , ,

Mailing Address 4354 GALEWOOD WAY

City
 CARMICHAEL

State
 CA

Zip Code
 95608

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 08 2016

Transaction ID : SA11AI.63336

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DEY, JANET S, , ,

Mailing Address 29968 MARQUETTE ST

City
 GARDEN CITY

State
 MI

Zip Code
 48135

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67427

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

875.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

DIAMOND, W.J., , ,**A.**

Mailing Address 220 WELLS ROAD

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : SA11AI.61661

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

DICK, VALERIE J, , ,**B.**

Mailing Address 3009 FRIENDS RD

City

ANNAPOLIS

State

MD

Zip Code

21401

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRADLEIEN APPLICATIONS INC.

Occupation

BOOKKEEPER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2016

Transaction ID : SA11AI.64672

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

DONZE, IDELL, , ,**C.**

Mailing Address 5645 EICHELBERGER ST

City

SAINT LOUIS

State

MO

Zip Code

63109

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.65168

Amount of Each Receipt this Period

52.00

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

552.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONZE, IDELL, , ,
Mailing Address 5645 EICHELBERGER ST

City State Zip Code
SAINT LOUIS MO 63109

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 02 2016

Transaction ID : SA11AI.67522

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EFRON, NEIL, , ,
Mailing Address 2637 MOHAWK CIRCLE

City State Zip Code
WEST PALM BEACH FL 33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
NOBLE PROPERTIES

Occupation
REAL ESTATE

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.61953

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ELKINS, CARL A, , ,
Mailing Address PO BOX 338

City State Zip Code
VICTOR CA 95253

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.67994

Amount of Each Receipt this Period

300.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

835.00

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 30 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

ENGSTROM, FREDERICK P, , ,

A.

Mailing Address PO BOX 946

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 14 2016

Transaction ID : SA11AI.64279

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

EVANS, EVAN WILSON, , ,

B.

Mailing Address 631A CESSNA AVE

City

FRIDAY HARBOR

State

WA

Zip Code

98250

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 02 2016

Transaction ID : SA11AI.67490

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

FERRI, PAUL, , ,

C.

Mailing Address 20 EAST SNAPPER POINT DRIVE

City

KEY LARGO

State

FL

Zip Code

33037

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNEMPLOYED

Occupation

UNEMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 24 2016

Transaction ID : SA11AI.61849

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) FILLMORE, H DUSTIN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2016	
Mailing Address 2712 MANORWOOD TRL			Transaction ID : SA11AI.63389	
City FORT WORTH	State TX	Zip Code 76109	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00		
B. Full Name (Last, First, Middle Initial) FILLMORE, H DUSTIN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2016	
Mailing Address 2712 MANORWOOD TRL			Transaction ID : SA11AI.68295	
City FORT WORTH	State TX	Zip Code 76109	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 400.00		
C. Full Name (Last, First, Middle Initial) FISKE, STEPHEN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2016	
Mailing Address 6100 HOLLYWOOD BLVD STE 305			Transaction ID : SA11AI.61899	
City HOLLYWOOD	State FL	Zip Code 33024	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer CITY FIRST MORTGAGE CORPORATION		Occupation MORTGAGE BANKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00		
SUBTOTAL of Receipts This Page (optional).....			_____ 650.00	
TOTAL This Period (last page this line number only).....			_____	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) FLEENOR, MARGARET L, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2016		
Mailing Address 3517 LENOX RD			Transaction ID : SA11AI.66915		
City BIRMINGHAM	State AL	Zip Code 35213	Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 300.00			
B. Full Name (Last, First, Middle Initial) FORD, VICTORIA I, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 02 / 2016		
Mailing Address 4303 FOREST PARK RD			Transaction ID : SA11AI.67339		
City JACKSONVILLE	State FL	Zip Code 32210	Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 350.00			
C. Full Name (Last, First, Middle Initial) GARDNER, BETTY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2016		
Mailing Address 1572 GOODIN HOLLOW RD			Transaction ID : SA11AI.66149		
City NOEL	State MO	Zip Code 64854	Amount of Each Receipt this Period _____ 135.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 665.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 435.00		
TOTAL This Period (last page this line number only)..... ▶			_____		

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARRAHAN-MASTERS, MARY PATRICIA, , ,
Mailing Address 501 HARRIET LN

City State Zip Code
HAVERTOWN PA 19083

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.68432

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GAYLER, WILLIAM L, , ,
Mailing Address 10015 US HIGHWAY 441

City State Zip Code
BOYNTON BEACH FL 33473

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64875

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEARHEART, MARILYN V, , ,
Mailing Address PO BOX 427

City State Zip Code
WATERVILLE WA 98858

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 11 2016

Transaction ID : SA11AI.63536

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) GERBER, BETTY ANN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 18 2016	
Mailing Address 4203 HAMBLEDON VILLAGE DR			Transaction ID : SA11AI.65029	
City HOUSTON	State TX	Zip Code 77014	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 275.00		
B. Full Name (Last, First, Middle Initial) GIBSON JR, FRED D, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 02 2016	
Mailing Address 3204 PLAZA DE RAFAEL			Transaction ID : SA11AI.67389	
City LAS VEGAS	State NV	Zip Code 89102	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) GODING, VERN H., , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 18 2016	
Mailing Address 648 ACACIA AVENUE			Transaction ID : SA11AI.61577	
City MELBOURNE VILLAGE	State FL	Zip Code 32904	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			850.00	
TOTAL This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRABOW, MIRIAM S, , ,**A.**

Mailing Address 6219 DORCHESTER WAY

City

VERO BEACH

State

FL

Zip Code

32966

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2016

Transaction ID : SA11AI.64697

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

GREEN, WAYNE R, , ,**B.**

Mailing Address 2521 W UPTON AVE

City

SPOKANE

State

WA

Zip Code

99205

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2016

Transaction ID : SA11AI.68613

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

GROSS, HELEN R, , ,**C.**

Mailing Address 1307 S RIVERSIDE HARBOR DR

City

POST FALLS

State

ID

Zip Code

83854

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2016

Transaction ID : SA11AI.67739

Amount of Each Receipt this Period

100.00

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

650.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GROTH, ELAYNE D, , ,

Mailing Address 9989 N LANGDON RD

City CITRUS SPRINGS	State FL	Zip Code 34434
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : SA11AI.65124

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GROTH, ELAYNE D, , ,

Mailing Address 9989 N LANGDON RD

City CITRUS SPRINGS	State FL	Zip Code 34434
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.67173

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GWINN, JAMES RAYMOND, , ,

Mailing Address 1850 E SAN MARTIN AVE

City SAN MARTIN	State CA	Zip Code 95046
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11AI.66314

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

300.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial) HALLMARK, HANK, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 13 / 2016		
Mailing Address 2511 S. EUCLID AVE.,			Transaction ID : SA11AI.61772		
City ONTARIO	State CA	Zip Code 91762	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer SELF-EMPLOYED		Occupation INSURANCE AGENT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) HANS, VIRGINIA H., , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 05 / 2016		
Mailing Address 8650 S. OCEAN DRIVE, APT 1104			Transaction ID : SA11AI.61686		
City JENSEN BEACH	State FL	Zip Code 34957	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) HANSBROUGH, BRUCE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 28 / 2016		
Mailing Address 11764 SW VALENCIA CT			Transaction ID : SA11AI.61880		
City PALM CITY	State FL	Zip Code 34990	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer SELF-EMPLOYED		Occupation CHIROPRACTOR			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)..... ▶	750.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARBS, CHARLOTTE H, , ,

Mailing Address 6486 82ND PL

City MIDDLE VILLAGE	State NY	Zip Code 11379
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 11 2016

Transaction ID : SA11AI.63514

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HARBS, CHARLOTTE H, , ,

Mailing Address 6486 82ND PL

City MIDDLE VILLAGE	State NY	Zip Code 11379
------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 08 2016

Transaction ID : SA11AI.68453

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HARMON, ELAINE O, , ,

Mailing Address 189 SPRING BEAUTY DR

City TRENTON	State NJ	Zip Code 08648
-----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 06 2016

Transaction ID : SA11AI.62819

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

200.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) HARMON, ELAINE O, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2016		
Mailing Address 189 SPRING BEAUTY DR			Transaction ID : SA11AI.65348		
City TRENTON	State NJ	Zip Code 08648	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Name of Employer HOMEMAKER			
Occupation HOMEMAKER		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 325.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			
B. Full Name (Last, First, Middle Initial) HARRIS, BOBBYE F, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2016		
Mailing Address 135 WINDSOR DR			Transaction ID : SA11AI.68309		
City CALHOUN	State GA	Zip Code 30701	Amount of Each Receipt this Period _____ 375.00		
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED			
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 1250.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			
C. Full Name (Last, First, Middle Initial) HEARD, JEFFREY, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2016		
Mailing Address 4584 SE WILLIAMS WAY			Transaction ID : SA11AI.61778		
City STUART	State FL	Zip Code 34997	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C		Name of Employer DELTA AIRLINES			
Occupation PILOT		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 250.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 675.00		
TOTAL This Period (last page this line number only)..... ▶			_____		

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENDERSON, FRANCISCA F, , ,
Mailing Address 122 N 82ND ST

City State Zip Code
MESA AZ 85207

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67102

Amount of Each Receipt this Period

80.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HENKEL, WALTER A, , ,
Mailing Address 6621 HEEGE RD

City State Zip Code
SAINT LOUIS MO 63123

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 22 2016

Transaction ID : SA11AI.65799

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HENRICHSEN, SHARON, , ,
Mailing Address 471 N 600 E

City State Zip Code
SPANISH FORK UT 84660

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67881

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

165.00

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

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HERMAN, GENE L, , ,

Mailing Address 11301 SW 1ST CT

City PLANTATION	State FL	Zip Code 33325
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64959

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HEWITT, LORETTA A, , ,

Mailing Address 757 FORT EBEY RD

City COUPEVILLE	State WA	Zip Code 98239
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.68655

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HIGGINS, MARIAN S, , ,

Mailing Address 630 WILLOW VALLEY SQ

City LANCASTER	State PA	Zip Code 17602
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
205.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67022

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

385.00

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

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HILLAND, NANCY K, , ,

Mailing Address 914 PIEDRA VISTA RD NE

City ALBUQUERQUE	State NM	Zip Code 87123
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2016

Transaction ID : SA11AI.62587

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HILLAND, NANCY K, , ,

Mailing Address 914 PIEDRA VISTA RD NE

City ALBUQUERQUE	State NM	Zip Code 87123
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 11 2016

Transaction ID : SA11AI.63470

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HILLAND, NANCY K, , ,

Mailing Address 914 PIEDRA VISTA RD NE

City ALBUQUERQUE	State NM	Zip Code 87123
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.66446

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HILLAND, NANCY K, , ,

Mailing Address 914 PIEDRA VISTA RD NE

City ALBUQUERQUE	State NM	Zip Code 87123
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67735

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 36380 NORTH 62ND STREET

City CAVE CREEK	State AZ	Zip Code 85331
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 25 2016

Transaction ID : SA11AI.61857

Amount of Each Receipt this Period

25.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HORNER, L DAVID, , ,

Mailing Address 26107 GOOSE NECK RD

City ROYAL OAK	State MD	Zip Code 21662
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.68707

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

375.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOTALING, WILLIAM B, , ,
Mailing Address 125 QUASSAICK AVE

City State Zip Code
NEW WINDSOR NY 12553

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2016

Transaction ID : SA11AI.62403

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOWE, SHIRLEY B, , ,
Mailing Address 2901 MONAD RD APT 93

City State Zip Code
BILLINGS MT 59102

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67672

Amount of Each Receipt this Period

40.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HUTH, MIRIAM B, , ,
Mailing Address 475 FOURTH FAIRWAY DR

City State Zip Code
ROSWELL GA 30076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64953

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

HUTH, MIRIAM B, , ,**A.**

Mailing Address 475 FOURTH FAIRWAY DR

City

ROSWELL

State

GA

Zip Code

30076

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2016

Transaction ID : SA11AI.66311

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

HUTH, MIRIAM B, , ,**B.**

Mailing Address 475 FOURTH FAIRWAY DR

City

ROSWELL

State

GA

Zip Code

30076

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2016

Transaction ID : SA11AI.67743

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

IRVINE, NORMA JEANNE, , ,**C.**

Mailing Address 703 AVENIDA PEQUENA

City

SANTA BARBARA

State

CA

Zip Code

93111

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2016

Transaction ID : SA11AI.63112

Amount of Each Receipt this Period

75.00

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

525.00

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

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACKSON, EVELYN L, , ,

Mailing Address 27 RIVERBEND DR

City SHELBY	State OH	Zip Code 44875
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 05 2016

Transaction ID : SA11AI.62544

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES L. KING ASSOCIATES, INC.

Mailing Address 474 PENINSULA DRIVE

City FORT PIERCE	State FL	Zip Code 34946
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 29 2016

Transaction ID : SA11AI.61658

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANICK, JOSEPH W, , ,

Mailing Address 2533 E BERYL AVE

City PHOENIX	State AZ	Zip Code 85028
-----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67551

Amount of Each Receipt this Period

400.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

850.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) JARVIS, BARBARA A, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2016		
Mailing Address 13923 DUNCANNON DR			Transaction ID : SA11AI.62676		
City HOUSTON	State TX	Zip Code 77015	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 525.00			
B. Full Name (Last, First, Middle Initial) JENSEN, ROBERT L, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2016		
Mailing Address 222 CROCKETT BENCH DR			Transaction ID : SA11AI.63607		
City OROFINO	State ID	Zip Code 83544	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 360.00			
C. Full Name (Last, First, Middle Initial) JORDAN, DONNA G, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2016		
Mailing Address 2377 W HILLS DR			Transaction ID : SA11AI.65890		
City LONGVIEW	State WA	Zip Code 98632	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			250.00		
TOTAL This Period (last page this line number only)..... ▶			250.00		

**SCHEDULE A (FEC Form 3)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

KARLAN, PETER L., , ,

Mailing Address 1268 SE FLEMING WAY

City
STUARTState
FLZip Code
34997FEC ID number of contributing
federal political committee.

C

Name of Employer
PETER L. KARLAN ANTIQUES, LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : SA11AI.61652

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAWAGUCHI, SACHIKO, , ,

Mailing Address PO BOX 10335

City
HILOState
HIZip Code
96721FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2016

Transaction ID : SA11AI.62781

Amount of Each Receipt this Period

350.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAWAGUCHI, SACHIKO, , ,

Mailing Address PO BOX 10335

City
HILOState
HIZip Code
96721FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2016

Transaction ID : SA11AI.66872

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1100.00

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

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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEEGAN, HOWARD W, , ,

Mailing Address 1029 RAY ST

City MANCHESTER	State NH	Zip Code 03104
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63185

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KING, BETTY J, , ,

Mailing Address 1601 PLANTATION DR

City HARLINGEN	State TX	Zip Code 78550
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67674

Amount of Each Receipt this Period

26.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 387 LAKE VICTORIA CIRCLE

City MELBOURNE	State FL	Zip Code 32940
-------------------	-------------	-------------------

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

Name of Employer POA	Occupation CCO
-------------------------	-------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61890

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

376.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) KIRSCHNER, HARRY J, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2016		
Mailing Address 2395 SUNSET DR			Transaction ID : SA11AI.63911		
City VENTURA	State CA	Zip Code 93001	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 345.00			
B. Full Name (Last, First, Middle Initial) KIRSCHNER, HARRY J, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2016		
Mailing Address 2395 SUNSET DR			Transaction ID : SA11AI.63912		
City VENTURA	State CA	Zip Code 93001	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 385.00			
C. Full Name (Last, First, Middle Initial) KIRSCHNER, HARRY J, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2016		
Mailing Address 2395 SUNSET DR			Transaction ID : SA11AI.64222		
City VENTURA	State CA	Zip Code 93001	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 430.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			125.00		
TOTAL This Period (last page this line number only)..... ▶			125.00		

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KISER, ROBERT M, , ,
Mailing Address 6548 43RD ST APT 1308

City State Zip Code
LUBBOCK TX 79407

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67814

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KITTREDGE, ROBERT M, , ,
Mailing Address 622 N DARTMOUTH RD

City State Zip Code
SPOKANE VALLEY WA 99206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 06 2016

Transaction ID : SA11AI.62869

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KITTREDGE, ROBERT M, , ,
Mailing Address 622 N DARTMOUTH RD

City State Zip Code
SPOKANE VALLEY WA 99206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67009

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

200.00

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

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

A. Full Name (Last, First, Middle Initial)
KLEIN, AGNES M, , ,

Mailing Address 2655 NEBRASKA AVE APT 618

City PALM HARBOR	State FL	Zip Code 34684
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 09 2016

Transaction ID : SA11AI.68642

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 7444 LONG AVENUE

City SKOKIE	State IL	Zip Code 60077
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.61698

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 7444 LONG AVENUE

City SKOKIE	State IL	Zip Code 60077
----------------	-------------	-------------------

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

Name of Employer PLATINUM HEALTHCARE	Occupation CEO
---	-------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.61700

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

5475.00

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

KLINE, WILLIAM R, , ,

A.

Mailing Address 726 HEDGEROW DR

City

BROOMALL

State

PA

Zip Code

19008

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 19 2016

Transaction ID : SA11AI.65395

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

KLINE, WILLIAM R, , ,

B.

Mailing Address 726 HEDGEROW DR

City

BROOMALL

State

PA

Zip Code

19008

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67719

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

KNIGHT, BETTY C, , ,

C.

Mailing Address 3807 SPRING MEADOW DR

City

ACWORTH

State

GA

Zip Code

30101

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2016

Transaction ID : SA11AI.64618

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

275.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KOLB, FREDERICK T, , ,

Mailing Address 4721 LAUREL ST

City BELLAIRE	State TX	Zip Code 77401
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.68266

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KONZE, ALICE STOCKTON, , ,

Mailing Address 7318 RIVERHILL RD

City OXON HILL	State MD	Zip Code 20745
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 08 / 2016

Transaction ID : SA11AI.63196

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KORFF, JOSEPH J., , ,

Mailing Address 488 MARINER DRIVE

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.61650

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

550.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) KOTOWITZ, HARRY, , , Mailing Address 584 GREEN PLACE			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 10 / 2016 Transaction ID : SA11AI.62311	
City WOODMERE	State NY	Zip Code 11598	Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer HK MANAGEMENT GROUP LLC Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
B. Full Name (Last, First, Middle Initial) KRONER, GENE, , , Mailing Address 3300 MONET DRIVE WEST			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 24 / 2016 Transaction ID : SA11AI.61851	
City PALM BEACH GARDENS	State FL	Zip Code 33410	Amount of Each Receipt this Period 700.00 <input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer SELF-EMPLOYED Occupation REAL ESTATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3300.00		
C. Full Name (Last, First, Middle Initial) KRONER, KAREN, , , Mailing Address 3300 MONET DRIVE WEST			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 24 / 2016 Transaction ID : SA11AI.61852	
City PALM BEACH GARDENS	State FL	Zip Code 33410	Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer HOMEMAKER Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2700.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			4000.00	
TOTAL This Period (last page this line number only)..... ▶				

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KUEBELBECK, BETTY M, , ,

Mailing Address 5400 NYODA WAY

City CARMICHAEL	State CA	Zip Code 95608
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 07 2016

Transaction ID : SA11AI.63037

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LANNERT, ROBERT C, , ,

Mailing Address 1418 BURR OAK CT

City HINSDALE	State IL	Zip Code 60521
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2016

Transaction ID : SA11AI.64513

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LEBLANC, LIONEL L, , ,

Mailing Address 203 BELMONT ST

City MANCHESTER	State NH	Zip Code 03103
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 26 2016

Transaction ID : SA11AI.66260

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

1200.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) LESETH, MARIE K, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 05 2016	
Mailing Address 1401 CELEBRATION AVE APT 206			Transaction ID : SA11AI.68144	
City KISSIMMEE	State FL	Zip Code 34747	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 300.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
B. Full Name (Last, First, Middle Initial) LESTER, ONA F, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 18 2016	
Mailing Address 1101 HUMPHRIES RD NW			Transaction ID : SA11AI.64792	
City CONYERS	State GA	Zip Code 30012	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 250.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
C. Full Name (Last, First, Middle Initial) LEVIN, HERBERT ALAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 06 2016	
Mailing Address 724 E GRINNELL DR			Transaction ID : SA11AI.62802	
City BURBANK	State CA	Zip Code 91501	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 570.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
SUBTOTAL of Receipts This Page (optional)..... ▶			450.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEVIN, HERBERT ALAN, , ,
Mailing Address 724 E GRINNELL DR

City State Zip Code
BURBANK CA 91501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
645.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 02 2016

Transaction ID : SA11AI.67329

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEVIN, HERBERT ALAN, , ,
Mailing Address 724 E GRINNELL DR

City State Zip Code
BURBANK CA 91501

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.68003

Amount of Each Receipt this Period

80.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LILLY, ADELINE C, , ,
Mailing Address 1811 ROCKLEDGE DR

City State Zip Code
ROCKLEDGE FL 32955

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
209.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67174

Amount of Each Receipt this Period

52.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

207.00

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LINDEMANN, JAMES D, , ,

Mailing Address 840 FM 2224

City HOLLIDAY	State TX	Zip Code 76366
------------------	-------------	-------------------

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

Name of Employer OWNER	Occupation LINDEMANN DRILLING COMPANY
---------------------------	--

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 29 2016

Transaction ID : SA11AI.66720

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINDSTROM, LOLITA J, , ,

Mailing Address 2435 SW CREEKSIDE DR

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 18 2016

Transaction ID : SA11AI.64740

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LOCKE, LOUISE G, , ,

Mailing Address 500 MOTT DR APT 218C

City RAYMORE	State MO	Zip Code 64083
-----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67533

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

375.00

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

LOHR, CALVIN E, , ,

A.

Mailing Address 818 W RIDDLE AVE

City

RAVENNA

State

OH

Zip Code

44266

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.68362

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

LUINA, ANGELO LOUIS, , ,

B.

Mailing Address 4380 VIREO AVE APT 3I

City

BRONX

State

NY

Zip Code

10470

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.67987

Amount of Each Receipt this Period

51.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

LYNCH, RICHARD B, , ,

C.

Mailing Address 13560 FRAN ST

City

EDWARDS

State

CA

Zip Code

93523

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 26 2016

Transaction ID : SA11AI.66262

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

201.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MACIAS, MANUEL M, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 06 / 2016		
Mailing Address 112 MACINTOSH LN			Transaction ID : SA11AI.62768		
City CENTERVILLE	State GA	Zip Code 31028	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Name of Employer SELF-EMPLOYED			
Occupation CONSULTANT		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 300.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			

B. Full Name (Last, First, Middle Initial) MADDOCK, WILLIAM R, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2016		
Mailing Address 2450 N WRENS NEST PL			Transaction ID : SA11AI.65071		
City TUCSON	State AZ	Zip Code 85715	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C		Name of Employer MADDOCK MACHINERY			
Occupation OWNER		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 500.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			

C. Full Name (Last, First, Middle Initial) MAFFEI, FRANK, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2016		
Mailing Address 10 HARBOUR ISLE DR. E. PH02			Transaction ID : SA11AI.61937		
City HUTCHINSON ISLAND	State FL	Zip Code 34949	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C		Name of Employer SELF-EMPLOYED			
Occupation BROKER		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Election Cycle-to-Date ▼ _____ 250.00		<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION			

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

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

_____ 800.00

**SCHEDULE A (FEC Form 3)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAGNUSON, MAMIE D, , ,

Mailing Address 643 S 87TH WAY

City MESA	State AZ	Zip Code 85208
--------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 08 / 2016

Transaction ID : SA11AI.63276

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAGNUSON, MAMIE D, , ,

Mailing Address 643 S 87TH WAY

City MESA	State AZ	Zip Code 85208
--------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA11AI.66609

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARSH, JERROLD V, , ,

Mailing Address 1392 FAIRHOLME RD

City GROSSE POINTE WOODS	State MI	Zip Code 48236
-----------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : SA11AI.64900

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

220.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARTIN, VELETTA, , ,
Mailing Address 526 SARAH LN APT 27

City State Zip Code
SAINT LOUIS MO 63141

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67020

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MASSIO, JANET M, , ,
Mailing Address 3311 POLO PL

City State Zip Code
BRONX NY 10465

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.66467

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MASSIO, JANET M, , ,
Mailing Address 3311 POLO PL

City State Zip Code
BRONX NY 10465

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67066

Amount of Each Receipt this Period

20.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

220.00

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MCCALL JR, PETER L, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2016	
Mailing Address 3316 SOCIETY HILL RD			Transaction ID : SA11AI.62530	
City SOCIETY HILL	State SC	Zip Code 29593	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) MCDONALD, DON, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 10 / 2016	
Mailing Address 11260 DONNER PASS RD.			Transaction ID : SA11AI.62282	
City TRUCKEE	State CA	Zip Code 96161	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
C. Full Name (Last, First, Middle Initial) MCGHEE, CHARLOTTE R, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2016	
Mailing Address 3651 N KAREN CT			Transaction ID : SA11AI.63414	
City DECATUR	State IL	Zip Code 62526	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			1350.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MCGURK JR, TOM, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 08 2016	
Mailing Address 7 DOUGLASS MNR			Transaction ID : SA11AI.63214	
City COVINGTON	State IN	Zip Code 47932	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer STEEL GRIP, INC.		Occupation TREASURER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 800.00		
B. Full Name (Last, First, Middle Initial) MCGURK JR, TOM, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 01 2016	
Mailing Address 7 DOUGLASS MNR			Transaction ID : SA11AI.67029	
City COVINGTON	State IN	Zip Code 47932	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer STEEL GRIP, INC.		Occupation TREASURER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1100.00		
C. Full Name (Last, First, Middle Initial) MCLAUGHLIN, DALLAS D, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 01 2016	
Mailing Address 806 S SPRUCE ST			Transaction ID : SA11AI.67010	
City KNOXVILLE	State IA	Zip Code 50138	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 210.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			735.00	
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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCLAUGHLIN, WILLIAM G, , ,

Mailing Address 7430 SUNSHINE SKYWAY LN S APT 806

City

SAINT PETERSBURG

State

FL

Zip Code

33711

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2016

Transaction ID : SA11AI.68228

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

METZ, BARBARA L, , ,

Mailing Address 2111 MALLARD CIR

City

WINTER PARK

State

FL

Zip Code

32789

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63173

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MIKELS, JACILYN, , ,

Mailing Address 4323 SW TALUGA STREET

City

PORT ST. LUCIE

State

FL

Zip Code

34953

FEC ID number of contributing
federal political committee.

C

Name of Employer

TREASURE COAST URGENT CARE

Occupation

DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61656

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

335.00

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

MLINE, SANDRA L., , ,

A.

Mailing Address 1005 SE SALERNO ROAD

City
STUART

State
FL

Zip Code
34997

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61667

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MORALES, BARBARA L., , ,

B.

Mailing Address 2256 W VALDINA AVE

City
ANAHEIM

State
CA

Zip Code
92801

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 19 2016

Transaction ID : SA11AI.65340

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MORRIS, ROSE MARIE, , ,

C.

Mailing Address 4115 CLOVERNOOK LN

City
SEABROOK

State
TX

Zip Code
77586

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.68009

Amount of Each Receipt this Period

70.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

620.00

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

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MORRIS, ROSE MARIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 08 / 2016	
Mailing Address 4115 CLOVERNOOK LN			Transaction ID : SA11AI.68375	
City SEABROOK	State TX	Zip Code 77586	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) MORRISON, JOHN A, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 27 / 2016	
Mailing Address 910 W THOMAS ST			Transaction ID : SA11AI.66472	
City ARLINGTON HEIGHTS	State IL	Zip Code 60004	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) MORSE, MARIE B, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2016	
Mailing Address 3025 WOODCLIFF DR NW			Transaction ID : SA11AI.63396	
City CANTON	State OH	Zip Code 44718	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00		

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

MUCH, MORRIE, , ,

Mailing Address 191 N WACKER DR STE 1800

City

CHICAGO

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATTORNEY

Occupation

MUCH SHELIST FREED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		12		2016

Transaction ID : SA11AI.63933

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MUMMA, FRANCIS H, , ,

Mailing Address 2560 N SHERMAN ST

City

YORK

State

PA

Zip Code

17406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : SA11AI.66658

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MUNDY, SUSAN HOPE, , ,

Mailing Address 4904 KANAWHA AVE SE

City

CHARLESTON

State

WV

Zip Code

25304

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2016

Transaction ID : SA11AI.65828

Amount of Each Receipt this Period

100.00

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

375.00

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

MURDOCH JR, DONALD M, , ,**A.**

Mailing Address 1777 BATES CT

City

THOUSAND OAKS

State

CA

Zip Code

91362

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		09		2016

Transaction ID : SA11AI.68631

Amount of Each Receipt this Period

150.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MURDOUGH, SAMUEL C, , ,**B.**

Mailing Address 5801 BENT PINE DR

City

VERO BEACH

State

FL

Zip Code

32967

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		12		2016

Transaction ID : SA11AI.63797

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MURPHY, BRIAN MICHAEL, , ,**C.**

Mailing Address 207 PTARMIGAN BLVD

City

WHITEFISH

State

MT

Zip Code

59937

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRIAN MURPHY REAL ESTATE

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.65163

Amount of Each Receipt this Period

250.00

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

600.00

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) NARDI, M JOAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2016	
Mailing Address 5282 YORKSHIRE RD			Transaction ID : SA11AI.63755	
City DETROIT	State MI	Zip Code 48224	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 205.00		
B. Full Name (Last, First, Middle Initial) NARDI, M JOAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 / 02 / 2016	
Mailing Address 5282 YORKSHIRE RD			Transaction ID : SA11AI.67343	
City DETROIT	State MI	Zip Code 48224	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 245.00		
C. Full Name (Last, First, Middle Initial) NARO, ROBERT D, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 06 / 2016	
Mailing Address 10791 S CEDAR NILES CIR			Transaction ID : SA11AI.62840	
City OLATHE	State KS	Zip Code 66061	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			270.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

NAULT, JOSEPH L, , ,**A.**

Mailing Address 100 VISTA BELLA WAY

City

NEWMAN

State

GA

Zip Code

30265

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		08		2016

Transaction ID : SA11AI.63209

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

NAYLOR, RUBY C, , ,**B.**

Mailing Address 132 S LOTUS AVE

City

PASADENA

State

CA

Zip Code

91107

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : SA11AI.67517

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

NEAL, GORDON G, , ,**C.**

Mailing Address 6983 PEACE PIPE CT

City

RENO

State

NV

Zip Code

89511

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		25		2016

Transaction ID : SA11AI.65994

Amount of Each Receipt this Period

50.50

☐ Memo Item
 CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

185.50

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 175
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) NEAL, GORDON G, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2016		
Mailing Address 6983 PEACE PIPE CT			Transaction ID : SA11AI.66882		
City RENO	State NV	Zip Code 89511	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 275.50			
B. Full Name (Last, First, Middle Initial) NIKKEL, JOHN G, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2016		
Mailing Address 6625 S JAMESTOWN AVE			Transaction ID : SA11AI.66132		
City TULSA	State OK	Zip Code 74136	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00			
C. Full Name (Last, First, Middle Initial) NOONAN, FRANK, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2016		
Mailing Address 241 LOCUST AVE			Transaction ID : SA11AI.63406		
City SAN RAFAEL	State CA	Zip Code 94901	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer SAUL ZAENTZ CO.		Occupation CFO/ACCOUNTANT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 600.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 750.00		
TOTAL This Period (last page this line number only)..... ▶			_____		

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ORLOFF, WARREN D, , ,

Mailing Address 2107 OCEAN AVE APT 404

City SANTA MONICA	State CA	Zip Code 90405
----------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67150

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 18 PLYMOUTH ROAD

City WESTFIELD	State NJ	Zip Code 07090
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : SA11AI.61811

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAPPAS, PETER J, , ,

Mailing Address 55 BROAD ST FRNT 4

City NEW YORK	State NY	Zip Code 10004
------------------	-------------	-------------------

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

Name of Employer CHAIRMAN	Occupation PJ MECHANICAL CORPORATION
------------------------------	---

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63350

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PATON, RYAN, , ,

Mailing Address 2512 SW 14TH AVE #503

City FORT LAUDERDALE	State FL	Zip Code 33315
-------------------------	-------------	-------------------

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

Name of Employer CAPITOL LENDING GROUP	Occupation MORTGAGE BROKER
---	-------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 03 / 2016

Transaction ID : SA11AI.61720

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

Mailing Address 1110 Windsong Rd.

City Orlando	State FL	Zip Code 32809
-----------------	-------------	-------------------

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

Name of Employer POA	Occupation OWNER
-------------------------	---------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11AI.61891

Amount of Each Receipt this Period

1700.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATTERSON, W STAN, , ,

Mailing Address 1109 WINDSONG ROAD

City ORLANDO	State FL	Zip Code 32809
-----------------	-------------	-------------------

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

Name of Employer POA	Occupation OWNER
-------------------------	---------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11AI.61893

Amount of Each Receipt this Period

2300.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

4250.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

PATTIE, E S, , ,

A.

Mailing Address 2404 RAYMOND PL

City

HAYMARKET

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.66978

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

PEARSON, MARTHA R, , ,

B.

Mailing Address 1421 GARLAND ST

City

MOBILE

State

AL

Zip Code

36618

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.68312

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

PEDERSEN, FLOYD, , ,

C.

Mailing Address 9419 STATE HIGHWAY 70

City

MARYSVILLE

State

CA

Zip Code

95901

FEC ID number of contributing
federal political committee.

C

Name of Employer

FLOYD PETERSON VENTURES

Occupation

FARMER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61641

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PEDERSEN, FLOYD, , ,

Mailing Address 9419 STATE HIGHWAY 70

City MARYSVILLE	State CA	Zip Code 95901
--------------------	-------------	-------------------

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

Name of Employer FLOYD PETERSON VENTURES	Occupation FARMER
---	----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67401

Amount of Each Receipt this Period

150.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PEELER, PAUL W, , ,

Mailing Address 11649 LEOPARD ST STE 3

City CORP CHRISTI	State TX	Zip Code 78410
----------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 13 2016

Transaction ID : SA11AI.64227

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PEELER, PAUL W, , ,

Mailing Address 11649 LEOPARD ST STE 3

City CORP CHRISTI	State TX	Zip Code 78410
----------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 02 2016

Transaction ID : SA11AI.67464

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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(check only one)

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

Perlson, Beverly, , ,

A.

Mailing Address 3615 BLUE RIDGE COURT

City

AURORA

State

IL

Zip Code

60504

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 30 2016

Transaction ID : SA11AI.61910

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

PINKERTON, GUY C, , ,

B.

Mailing Address 514 NE 97TH ST

City

SEATTLE

State

WA

Zip Code

98115

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 11 2016

Transaction ID : SA11AI.63468

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

POOL, RAY, , ,

C.

Mailing Address 108 MAINBERRY DR

City

MADERA

State

CA

Zip Code

93637

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.66417

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) PRATT, JOHN H, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2016		
Mailing Address 244 VALLEY RD			Transaction ID : SA11AI.64226		
City HILLSBOROUGH	State NJ	Zip Code 08844	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 700.00			
B. Full Name (Last, First, Middle Initial) PUTZAN, CONRAD S, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2016		
Mailing Address 316 MONCEAUX RD			Transaction ID : SA11AI.63363		
City WEST PALM BEACH	State FL	Zip Code 33405	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1350.00			
C. Full Name (Last, First, Middle Initial) PUTZAN, CONRAD S, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2016		
Mailing Address 316 MONCEAUX RD			Transaction ID : SA11AI.66400		
City WEST PALM BEACH	State FL	Zip Code 33405	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1400.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			400.00		
TOTAL This Period (last page this line number only)..... ▶					

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) PUTZAN, CONRAD S, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 05 / 2016		
Mailing Address 316 MONCEAUX RD			Transaction ID : SA11AI.68051		
City	State	Zip Code	Amount of Each Receipt this Period		
WEST PALM BEACH	FL	33405	100.00		
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00			
B. Full Name (Last, First, Middle Initial) RAINS, CLAIRE L, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2016		
Mailing Address 420 41ST AVE			Transaction ID : SA11AI.65827		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN FRANCISCO	CA	94121	100.00		
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 360.00			
C. Full Name (Last, First, Middle Initial) RAINS, CLAIRE L, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2016		
Mailing Address 420 41ST AVE			Transaction ID : SA11AI.67408		
City	State	Zip Code	Amount of Each Receipt this Period		
SAN FRANCISCO	CA	94121	100.00		
FEC ID number of contributing federal political committee.		C	<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 460.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			300.00		
TOTAL This Period (last page this line number only)..... ▶					

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAMSEIER, CARLA, , ,

Mailing Address 3152 SAN MICHELE DR.

City PALM BEACH GARDENS	State FL	Zip Code 33418
----------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 26 2016

Transaction ID : SA11AI.61860

Amount of Each Receipt this Period
500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDALL, WILLIAM P N, , ,

Mailing Address 3681 SHAMROCK DR

City VENICE	State FL	Zip Code 34293
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 01 2016

Transaction ID : SA11AI.62456

Amount of Each Receipt this Period
100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RANDALL, WILLIAM P N, , ,

Mailing Address 3681 SHAMROCK DR

City VENICE	State FL	Zip Code 34293
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.68565

Amount of Each Receipt this Period
100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

700.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

REGISTER JR, SAM, , ,

Mailing Address 2804 PEBBLEWOOD DR

City

VALDOSTA

State

GA

Zip Code

31602

FEC ID number of contributing
federal political committee.

C

Name of Employer

VALDOSTA CITY SCHOOLS

Occupation

RETIRED SCHOOL TEACHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		05		2016

Transaction ID : SA11AI.62656

Amount of Each Receipt this Period

150.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

REGISTER JR, SAM, , ,

Mailing Address 2804 PEBBLEWOOD DR

City

VALDOSTA

State

GA

Zip Code

31602

FEC ID number of contributing
federal political committee.

C

Name of Employer

VALDOSTA CITY SCHOOLS

Occupation

RETIRED SCHOOL TEACHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.65061

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

REGISTER JR, SAM, , ,

Mailing Address 2804 PEBBLEWOOD DR

City

VALDOSTA

State

GA

Zip Code

31602

FEC ID number of contributing
federal political committee.

C

Name of Employer

VALDOSTA CITY SCHOOLS

Occupation

RETIRED SCHOOL TEACHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		01		2016

Transaction ID : SA11AI.67091

Amount of Each Receipt this Period

150.00

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

500.00

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

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REINHARD, DONALD G, , ,

Mailing Address 75 HARVARD AVE

City PALMERTON	State PA	Zip Code 18071
-------------------	-------------	-------------------

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

Name of Employer PENER SERVICES INC.	Occupation SEMI RETIRED EXEC.
---	----------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : SA11AI.63648

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RESNIK, ELIZABETH P, , ,

Mailing Address 635 S PARK CENTRE AVE APT 1321

City GREEN VALLEY	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.63064

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RESNIK, ELIZABETH P, , ,

Mailing Address 635 S PARK CENTRE AVE APT 1321

City GREEN VALLEY	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.67416

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
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)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) RIGGS, CHARLES A, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 01 2016	
Mailing Address 15 THOMAS POINTE DR			Transaction ID : SA11AI.67135	
City FORT THOMAS	State KY	Zip Code 41075	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) RIGGS, CHARLES A, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 02 2016	
Mailing Address 15 THOMAS POINTE DR			Transaction ID : SA11AI.67485	
City FORT THOMAS	State KY	Zip Code 41075	Amount of Each Receipt this Period 101.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 601.00		
C. Full Name (Last, First, Middle Initial) RITCH, PHILIP E, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 28 2016	
Mailing Address 146 KALUAMOO ST			Transaction ID : SA11AI.66543	
City KAILUA	State HI	Zip Code 96734	Amount of Each Receipt this Period 67.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 527.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			268.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) RITCH, PHILIP E, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2016	
Mailing Address 146 KALUAMOO ST			Transaction ID : SA11AI.67326	
City KAILUA	State HI	Zip Code 96734	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 562.00		
B. Full Name (Last, First, Middle Initial) ROBERTS, PAUL, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2016	
Mailing Address 1887 NW PINE LAKE DRIVE			Transaction ID : SA11AI.61618	
City STUART	State FL	Zip Code 34994	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 275.00		
C. Full Name (Last, First, Middle Initial) ROLFE, KENNETH L, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 26 / 2016	
Mailing Address 301 SE FOUNDATION DR			Transaction ID : SA11AI.66360	
City DALLAS	State OR	Zip Code 97338	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			235.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROPPE, GERALD A, , ,

Mailing Address 211 S MILLER ST

City LEWISTOWN	State MT	Zip Code 59457
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.68382

Amount of Each Receipt this Period

40.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 77 PHILLIPS AVE

City ROCKPORT	State MA	Zip Code 01966
------------------	-------------	-------------------

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

Name of Employer JN PHILLIPS COMPANY	Occupation BUSINESS
---	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.61726

Amount of Each Receipt this Period

750.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROSSBOROUGH, W N, , ,

Mailing Address 8 WESTHAMPTON DR

City ROCKY RIVER	State OH	Zip Code 44116
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2016

Transaction ID : SA11AI.65690

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

1040.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROTH, RICHARD A, , ,
Mailing Address 1055 LITCHFIELD PL

City State Zip Code
GALLATIN TN 37066

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 12 2016

Transaction ID : SA11AI.63881

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUFFING, NORMAN, , ,
Mailing Address 26654 S NEW TOWN DR

City State Zip Code
SUN LAKES AZ 85248

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2016

Transaction ID : SA11AI.64614

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SAFT, BRAD, , ,
Mailing Address 122 TALAVERA PL

City State Zip Code
PALM BEACH GARDENS FL 33418

FEC ID number of contributing
federal political committee.

C

Name of Employer
EVERBRIGHT MEDIA

Occupation
CEO

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.61784

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

800.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

SAIZ, STANLEY O, , ,

A.

Mailing Address 3720 N LINCOLN TRL

City

PLEASANT PLAINS

State

IL

Zip Code

62677

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63259

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SAIZ, STANLEY O, , ,

B.

Mailing Address 3720 N LINCOLN TRL

City

PLEASANT PLAINS

State

IL

Zip Code

62677

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 19 2016

Transaction ID : SA11AI.65475

Amount of Each Receipt this Period

300.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SAULSBURY, MARY C, , ,

C.

Mailing Address 5209 N BENTWOOD DR

City

SAN ANGELO

State

TX

Zip Code

76904

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2016

Transaction ID : SA11AI.66585

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

600.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SCHAEENEN JR, NELSON S, , ,

Mailing Address 56 MIDWOOD TER

City
MADISONState
NJZip Code
07940FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
07	01	2016

Transaction ID : SA11AI.62364

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. SCHLEICH, DOROTHY M, , ,

Mailing Address 160 E WALNUT ST APT 121

City
CANTONState
ILZip Code
61520FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

261.00

Date of Receipt

M M	D D	Y Y Y Y
07	05	2016

Transaction ID : SA11AI.62616

Amount of Each Receipt this Period

52.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. SCHLEICH, DOROTHY M, , ,

Mailing Address 160 E WALNUT ST APT 121

City
CANTONState
ILZip Code
61520FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

313.00

Date of Receipt

M M	D D	Y Y Y Y
07	19	2016

Transaction ID : SA11AI.65432

Amount of Each Receipt this Period

52.00

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

354.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHLEICH, DOROTHY M, , ,

Mailing Address 160 E WALNUT ST APT 121

City CANTON	State IL	Zip Code 61520
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
391.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67023

Amount of Each Receipt this Period

78.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCHNIER, RUTH J, , ,

Mailing Address 7380 LEISURE LN

City MASON	State OH	Zip Code 45040
---------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64956

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCHNIER, RUTH J, , ,

Mailing Address 7380 LEISURE LN

City MASON	State OH	Zip Code 45040
---------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 25 2016

Transaction ID : SA11AI.66087

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

213.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 175
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) SCHNIER, RUTH J, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2016		
Mailing Address 7380 LEISURE LN			Transaction ID : SA11AI.67004		
City MASON	State OH	Zip Code 45040	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 435.00			
B. Full Name (Last, First, Middle Initial) SCHUBERT JR, JOSEPH J, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2016		
Mailing Address PO BOX 23			Transaction ID : SA11AI.68452		
City LITTLE FALLS	State MN	Zip Code 56345	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			
C. Full Name (Last, First, Middle Initial) SHARKEY, DANIEL E., , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2016		
Mailing Address 1151 SW GREENBRIAR COVE			Transaction ID : SA11AI.61673		
City PORT ST. LUCIE	State FL	Zip Code 34986	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer TREASURE COAST		Occupation DOCTOR			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 650.00		
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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHELLEY, THEORA, , ,

Mailing Address 10624 E TERRA DR

City SCOTTSDALE	State AZ	Zip Code 85258
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 01 2016

Transaction ID : SA11AI.66994

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SHILLINGBURG, JOHN E, , ,

Mailing Address 4800 FILLMORE AVE APT 603

City ALEXANDRIA	State VA	Zip Code 22311
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 01 2016

Transaction ID : SA11AI.62412

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHILLINGBURG, JOHN E, , ,

Mailing Address 4800 FILLMORE AVE APT 603

City ALEXANDRIA	State VA	Zip Code 22311
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 279.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 15 2016

Transaction ID : SA11AI.64537

Amount of Each Receipt this Period

52.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

287.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHIPLER, THOMAS J, , ,**A.**

Mailing Address 1583 SNOWBIRD DR NW

City

SALEM

State

OR

Zip Code

97304

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2016

Transaction ID : SA11AI.66745

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHOTTHAFER, DANIEL, , ,**B.**

Mailing Address 214 ALDERVIEW DR.

City

PORT ANGELES

State

WA

Zip Code

98362

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		10		2016

Transaction ID : SA11AI.62321

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SIDBURY, M D, , ,**C.**

Mailing Address 1436 TALBOT RD

City

PLEASANT GARDEN

State

NC

Zip Code

27313

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.65148

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

SIEFFERT JR, JOHN J, ,**A.**

Mailing Address 740 RANDALL DR

City
TROYState
MIZip Code
48085FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

Transaction ID : SA11AI.68449

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SIEGEL, L PENDLETON, ,**B.**

Mailing Address 2230 W RIVERSIDE AVE APT 101

City
SPOKANEState
WAZip Code
99201FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	6

Transaction ID : SA11AI.65687

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SIMPSON, GENEVA F, ,**C.**

Mailing Address 4862 W KY 9

City
VANCEBURGState
KYZip Code
41179FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	6

Transaction ID : SA11AI.65733

Amount of Each Receipt this Period

50.00

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

650.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SIMPSON, GENEVA F, , ,

Mailing Address 4862 W KY 9

City VANCEBURG	State KY	Zip Code 41179
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.68078

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 2960 BENT CYPRESS RD

City WELLINGTON	State FL	Zip Code 33414
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.67502

Amount of Each Receipt this Period

101.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SLAWIAK, RAYMOND F, , ,

Mailing Address 4605 BEAVER MEADOW RD

City VERNON	State NY	Zip Code 13476
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : SA11AI.62380

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

251.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SLAWIAK, RAYMOND F, , ,

Mailing Address 4605 BEAVER MEADOW RD

City VERNON	State NY	Zip Code 13476
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : SA11AI.65617

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 1223 VILLAGE RUN NE

City BROOKHAVEN	State ID	Zip Code 30319
--------------------	-------------	-------------------

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

Name of Employer REAL ESTATE ADVISORY, LLC	Occupation ENVIRONMENTAL CONSULTANT
---	--

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2016

Transaction ID : SA11AI.61709

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SOMMER, J G, , ,

Mailing Address 22516 GREENWOOD AVE

City TORRANCE	State CA	Zip Code 90505
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.66946

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SPANO, PETER F, , ,

Mailing Address 4001 N OCEAN BLVD 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: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 08 / 2016

Transaction ID : SA11AI.63329

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SPEARS JR, HAROLD T, , ,

Mailing Address PO BOX 1528

City LAKELAND	State FL	Zip Code 33802
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.68172

Amount of Each Receipt this Period

101.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SPIES, AVIS D, , ,

Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.66752

Amount of Each Receipt this Period

150.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

751.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) STADE, STELLA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2016	
Mailing Address 2679 ALBION AVE APT 302			Transaction ID : SA11AI.65522	
City FAIRMONT	State MN	Zip Code 56031	Amount of Each Receipt this Period _____ 52.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 227.00		
B. Full Name (Last, First, Middle Initial) STADE, STELLA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Mailing Address 2679 ALBION AVE APT 302			Transaction ID : SA11AI.66188	
City FAIRMONT	State MN	Zip Code 56031	Amount of Each Receipt this Period _____ 35.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 262.00		
C. Full Name (Last, First, Middle Initial) STADE, STELLA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2016	
Mailing Address 2679 ALBION AVE APT 302			Transaction ID : SA11AI.67175	
City FAIRMONT	State MN	Zip Code 56031	Amount of Each Receipt this Period _____ 35.00	
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 297.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 122.00	
TOTAL This Period (last page this line number only)..... ▶			_____	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

STAHMANN, KATHRYN A, , ,

A. Mailing Address 42 N TANGLEWOOD SPUR

City
SEDONA

State
AZ

Zip Code
86351

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 22 2016

Transaction ID : SA11AI.65855

Amount of Each Receipt this Period

115.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEPHENS, PATRICIA J, , ,

B. Mailing Address 790 CHAMPION OAKS CIR

City
HAVANA

State
FL

Zip Code
32333

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.65109

Amount of Each Receipt this Period

50.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

STERNLIEB, CAROL ANN, , ,

C. Mailing Address 5180 WOODLAND LAKES DRIVE

City
PALM BEACH GARDENS

State
FL

Zip Code
33418

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61663

Amount of Each Receipt this Period

400.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

565.00

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ST GEORGE, NICHOLAS J, , ,

Mailing Address 971 GEORGIA AVE

City

WINTER PARK

State

FL

Zip Code

32789

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : SA11AI.68158

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. STOVER, RUTH O, , ,

Mailing Address 3223 WOOD DALE RD

City

CHESTER

State

VA

Zip Code

23831

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

Transaction ID : SA11AI.66699

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. STROM, RYAN L., , ,

Mailing Address 335 SE CARDINAL WAY

City

STUART

State

FL

Zip Code

34996

FEC ID number of contributing
federal political committee.

C

Name of Employer

TEAM PARKS, INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

Transaction ID : SA11AI.61671

Amount of Each Receipt this Period

500.00

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

850.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUGDEN JR, HERB J, , ,
Mailing Address 17800 SE 237TH CT

City
UMATILLAState
FLZip Code
32784FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2016

Transaction ID : SA11AI.64520

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SUGDEN MD, RICHARD, , ,
Mailing Address 557 E. BROADWAY P.O. BOX 2468

City
JACKSONState
WYZip Code
83001FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2016

Transaction ID : SA11AI.61944

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SYLVESTRI, RONALD J, , ,
Mailing Address 280 BRONXVILLE RD

City
BRONXVILLEState
NYZip Code
10708FEC ID number of contributing
federal political committee.

C

Name of Employer
HUDSON VALLEY BANKOccupation
BANKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		26		2016

Transaction ID : SA11AI.66306

Amount of Each Receipt this Period

100.00

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

1350.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

SYLVESTRI, RONALD J, , ,

A.

Mailing Address 280 BRONXVILLE RD

City

BRONXVILLE

State

NY

Zip Code

10708

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUDSON VALLEY BANK

Occupation

BANKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.66698

Amount of Each Receipt this Period

20.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

TARANTINO, JOE, , ,

B.

Mailing Address 3840 OVERLAKE DRIVE

City

CUMMING

State

GA

Zip Code

30041

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALKER & DUNLOP

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.61705

Amount of Each Receipt this Period

-250.00

☐ Memo Item
OVER THE LIMIT CAMP CONTRIBUTION

Full Name (Last, First, Middle Initial)

TAXMAN, NANCY, , ,

C.

Mailing Address 5 COLTON LANE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11AI.61702

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

2470.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

TAYLOR, MARILYN J., , ,**A.**

Mailing Address 804 TOBACCPORT ROAD

City

BUMPUS MILLS

State

TN

Zip Code

37028

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		18		2016

Transaction ID : SA11AI.61579

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

TEINERT, FLORENE L., , ,**B.**

Mailing Address 2917 PLANTATION DR

City

ROUND ROCK

State

TX

Zip Code

78681

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : SA11AI.67480

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMPSON, LUCILLE R., , ,**C.**

Mailing Address 7 GLENEAGLES

City

SHOAL CREEK

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2016

Transaction ID : SA11AI.62784

Amount of Each Receipt this Period

100.00

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

385.00

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 PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOMAN, CECILIA G, , ,

Mailing Address 9322 GARDENDALE ST

City BELLFLOWER	State CA	Zip Code 90706
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.67705

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TOWNSEND JR, JOHN S, , ,

Mailing Address 8306 ROAD 3.2 NE

City MOSES LAKE	State WA	Zip Code 98837
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : SA11AI.65307

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TROCCHIA, ARON M., , ,

Mailing Address 2222 NW PLUMBAGO TRAIL

City STUART	State FL	Zip Code 34994
----------------	-------------	-------------------

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

Name of Employer COASTAL ORTHOPAEDIC	Occupation DOCTOR
---	----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11AI.61654

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

485.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TURNAUER, GERALD, , ,

Mailing Address 10921 NW 3RD STREET

City PLANTATION	State FL	Zip Code 33324
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.68851

Amount of Each Receipt this Period

700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 1668 W GLENDALE AVE APT 402

City PHOENIX	State AR	Zip Code 85021
-----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.68853

Amount of Each Receipt this Period

300.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ULRICH, ROBERT J., , ,

Mailing Address 5400 LONDON BERRY ROAD

City EDINA	State MN	Zip Code 55436
---------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.61586

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

3700.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) VEAZEY, WILLIAM K, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 06 2016	
Mailing Address 2108 NW 61ST ST			Transaction ID : SA11AI.62913	
City OKLAHOMA CITY	State OK	Zip Code 73112	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) VEAZEY, WILLIAM K, , ,			Date of Receipt M M / D D / Y Y Y Y Y 08 03 2016	
Mailing Address 2108 NW 61ST ST			Transaction ID : SA11AI.67817	
City OKLAHOMA CITY	State OK	Zip Code 73112	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 350.00		

C. Full Name (Last, First, Middle Initial) VIKTOR, KENNETH B, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 08 2016	
Mailing Address 259 AVENIDA LOBEIRO APT G			Transaction ID : SA11AI.63198	
City SAN CLEMENTE	State CA	Zip Code 92672	Amount of Each Receipt this Period 112.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 237.00		

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

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

262.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

VIKTOR, KENNETH B, , ,**A.**

Mailing Address 259 AVENIDA LOBEIRO APT G

City

SAN CLEMENTE

State

CA

Zip Code

92672

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

349.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		08		2016

Transaction ID : SA11AI.68391

Amount of Each Receipt this Period

112.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

VOELL, RICHARD A, , ,**B.**

Mailing Address 13611 DEERING BAY DR

City

CORAL GABLES

State

FL

Zip Code

33158

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2016

Transaction ID : SA11AI.62836

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

VOELL, RICHARD A, , ,**C.**

Mailing Address 13611 DEERING BAY DR

City

CORAL GABLES

State

FL

Zip Code

33158

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2066.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2016

Transaction ID : SA11AI.67370

Amount of Each Receipt this Period

316.00

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

1428.00

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WALDEN, ROBERT L, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 18 2016		
Mailing Address 34 NW 1144 PRIVATE RD			Transaction ID : SA11AI.65113		
City LEETON	State MO	Zip Code 64761	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 235.00			
B. Full Name (Last, First, Middle Initial) WALLACE, JERRI K, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 18 2016		
Mailing Address 109 GLENROSE LN			Transaction ID : SA11AI.64810		
City CARY	State NC	Zip Code 27518	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 335.00			
C. Full Name (Last, First, Middle Initial) WEBER, CHARLENE E, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 18 2016		
Mailing Address 14300 CHENAL PKWY APT 1117			Transaction ID : SA11AI.65161		
City LITTLE ROCK	State AR	Zip Code 72211	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 210.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			160.00		
TOTAL This Period (last page this line number only)..... ▶					

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEBER, CHARLENE E, , ,
Mailing Address 14300 CHENAL PKWY APT 1117

City State Zip Code
LITTLE ROCK AR 72211

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
08 03 2016

Transaction ID : SA11AI.67901

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WEEKS, ANNIE H, , ,
Mailing Address 3411 ROCK LN

City State Zip Code
IRONDALE AL 35210

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
08 05 2016

Transaction ID : SA11AI.68129

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WEST, MABEL A, , ,
Mailing Address 292 SMITH ST APT 119

City State Zip Code
CLIO MI 48420

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67186

Amount of Each Receipt this Period

105.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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)
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITE, ROBERT D, , ,

Mailing Address 55 DINSMORE AVE APT 608

City FRAMINGHAM	State MA	Zip Code 01702
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 05 / 2016

Transaction ID : SA11AI.62526

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WHITE, ROBERT D, , ,

Mailing Address 55 DINSMORE AVE APT 608

City FRAMINGHAM	State MA	Zip Code 01702
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016

Transaction ID : SA11AI.65757

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WHITE, ROBERT D, , ,

Mailing Address 55 DINSMORE AVE APT 608

City FRAMINGHAM	State MA	Zip Code 01702
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : SA11AI.67654

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CAMPAIGN CONTRIBUTION

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

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

200.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHITEHEAD, ALBERT E, , ,

A.

Mailing Address 3214 E 73RD ST

City

TULSA

State

OK

Zip Code

74136

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64825

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

WIEDEMAN, SCOTT N, , ,

B.

Mailing Address 8351 E BROOKHILL DR

City

TUCSON

State

AZ

Zip Code

85750

FEC ID number of contributing
federal political committee.

C

Name of Employer

GLOBAL SOLAR ENERGY INC.

Occupation

SCIENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 26 2016

Transaction ID : SA11AI.66345

Amount of Each Receipt this Period

75.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAMS, JEAN D, , ,

C.

Mailing Address 1407 SHARON RD

City

TALLAHASSEE

State

FL

Zip Code

32303

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2016

Transaction ID : SA11AI.63325

Amount of Each Receipt this Period

300.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

475.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAMS, JEAN D, , ,

Mailing Address 1407 SHARON RD

City TALLAHASSEE	State FL	Zip Code 32303
---------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.67220

Amount of Each Receipt this Period

225.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILSON, HILDA L, , ,

Mailing Address 608 S TUGALOO ST

City WALHALLA	State SC	Zip Code 29691
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 06 2016

Transaction ID : SA11AI.62865

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 1800 SUMMERLAND AVENUE

City WINTER PARK	State FL	Zip Code 32789
---------------------	-------------	-------------------

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

Name of Employer N/A	Occupation LAW STUDENT
-------------------------	---------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2016

Transaction ID : SA11AI.61665

Amount of Each Receipt this Period

500.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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

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

825.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINZENBURG, CLARION A, , ,

Mailing Address 1772 WHITETAIL AVE

City SUMNER	State IA	Zip Code 50674
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11AI.64876

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WOLGEMUTH, DONALD H, , ,

Mailing Address PO BOX 5093

City LANCASTER	State PA	Zip Code 17606
-------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2016

Transaction ID : SA11AI.62459

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WULF, MARTA S WEEKS, , ,

Mailing Address 904 E RIDGE VILLAGE DR

City CUTLER BAY	State FL	Zip Code 33157
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : SA11AI.66505

Amount of Each Receipt this Period

100.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

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
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WULFF, RICHARD E, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 06 / 2016		
Mailing Address 2240 SUPERIOR AVE			Transaction ID : SA11AI.62823		
City CUMBERLAND	State WI	Zip Code 54829	Amount of Each Receipt this Period _____ 35.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 205.00			
B. Full Name (Last, First, Middle Initial) WULFF, RICHARD E, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2016		
Mailing Address 2240 SUPERIOR AVE			Transaction ID : SA11AI.63170		
City CUMBERLAND	State WI	Zip Code 54829	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 255.00			
C. Full Name (Last, First, Middle Initial) WULFF, RICHARD E, , ,			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2016		
Mailing Address 2240 SUPERIOR AVE			Transaction ID : SA11AI.63765		
City CUMBERLAND	State WI	Zip Code 54829	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Memo Item CAMPAIGN CONTRIBUTION			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 355.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 185.00		
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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YOUNG, DOROTHY K, , ,

Mailing Address 4328 N HALL ST

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.62511

Amount of Each Receipt this Period

3.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
YOUNG, DOROTHY K, , ,

Mailing Address 4328 N HALL ST

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : SA11AI.65324

Amount of Each Receipt this Period

10.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ZOESCH, GLORIA J, , ,

Mailing Address 2025 SE 102ND AVE

City PORTLAND	State OR	Zip Code 97216
------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.67545

Amount of Each Receipt this Period

35.00

☐ Memo Item
CAMPAIGN CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

48.00
84258.00

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

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN CLARITY AND EXCEPTIONALISM (ACEPAC)

Mailing Address 20533 BISCAYNE BLVD
#250

City State Zip Code
MIAMI FL 33180

FEC ID number of contributing
federal political committee.

C C00492587

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 18 2016

Transaction ID : SA11C.61588

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

CITIZENS UNITED POLITICAL VICTORY FUND

Mailing Address 1006 PENNSYLVANIA AVE. SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00295527

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2016

Transaction ID : SA11C.61692

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

COHEN, PHILIP, H., ,

Mailing Address 1500 OCEAN DRIVE
903

City State Zip Code
MIAMI BEACH FL 33139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 10 2016

Transaction ID : SA11C.61694

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAMPAIGN CONTRIBUTION - EARMARKED
THROUGH AMERICAN PRINCIPLES

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

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

7950.00

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

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN PRINCIPLES

Mailing Address 20533 BISCAYNE BLVD
 #250

City State Zip Code
 MIAMI FL 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 10 2016

Transaction ID : SA11C.61694.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
FLORIDA CONGRESSIONAL COMMITTEE

Mailing Address 6100 HOLLYWOOD BLVD
 SUITE 305

City State Zip Code
 HOLLYWOOD FL 33024

FEC ID number of contributing federal political committee. **C** C00127811

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 10 2016

Transaction ID : SA11C.61696

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HSP DIRECT LLC PAC HSP PAC

Mailing Address 13755 SUNRISE VALLEY DRIVE
 STE 450

City State Zip Code
 HERNDON VA 20171

FEC ID number of contributing federal political committee. **C** C00432419

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 05 2016

Transaction ID : SA11C.61690

Amount of Each Receipt this Period

2700.00

☐ Memo Item

CAMPAIGN CONTRIBUTION

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

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

5200.00
 13150.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAST VICTORY COMMITTEE

A.

Mailing Address 824 S MILLEDGE AVE STE 101

City

ATHENS

State

GA

Zip Code

30605

FEC ID number of contributing
federal political committee.

C C00583161

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10448.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : SA12.61704

Amount of Each Receipt this Period

10448.98

☐ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAOLERCIO, MICHAEL, , ,

B.

Mailing Address 613 HERMITAGE CIRCLE

City

PALM BEACH GARDENS

State

FL

Zip Code

33410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.0

Amount of Each Receipt this Period

500.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

STOCH, RUSSELL B., , ,

C.

Mailing Address 104 VINTAGE ISLE LANE

City

PALM BEACH GARDENS

State

FL

Zip Code

33418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.3

Amount of Each Receipt this Period

500.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

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

10448.98

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BYRD, BARRY, , ,

Mailing Address 13819 PARC DRIVE

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

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

Name of Employer BRYD MARKETING CO.	Occupation MARKETING EXEC
--	------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.4

Amount of Each Receipt this Period

250.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NOCERA, RONALD M., , ,

Mailing Address 3702 DIJON WAY

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.5

Amount of Each Receipt this Period

1000.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

Mailing Address 7098 ALYSHIRE LANE

City BOCA RATON	State FL	Zip Code 33432
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.6

Amount of Each Receipt this Period

200.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

TOTAL 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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) FLACK, ROY, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 2065 LA PORTE DRIVE			Transaction ID : SA12.61704.7	
City PALM BEACH GARDENS	State FL	Zip Code 33410	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 1000.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
B. Full Name (Last, First, Middle Initial) FLACK, NAOMI, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 2065 LA PORTE DRIVE			Transaction ID : SA12.61704.8	
City PALM BEACH GARDENS	State FL	Zip Code 33410	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 500.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
C. Full Name (Last, First, Middle Initial) BLAIR, ROSE V., , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 400 S. OCEAN BOULEVARD APT 106			Transaction ID : SA12.61704.10	
City PALM BEACH	State FL	Zip Code 33480	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 250.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
SUBTOTAL of Receipts This Page (optional).....			_____ 0.00	
TOTAL This Period (last page this line number only).....			_____	

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAFFEE, ROBERT D., , ,
Mailing Address 7186 AYRSHIRE LANE

City
BOCA RATON

State
FL

Zip Code
33496

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	6

Transaction ID : SA12.61704.13

Amount of Each Receipt this Period

200.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REBACK, SHARON, K, ,
Mailing Address 11235 OLD HARBOUR ROAD

City
NORTH PALM BEACH

State
FL

Zip Code
33408

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	6

Transaction ID : SA12.61704.15

Amount of Each Receipt this Period

250.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TRENT, JOHN, , ,
Mailing Address PO BOX 2514

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	6

Transaction ID : SA12.61704.16

Amount of Each Receipt this Period

250.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

DIAMOND, W.J., , ,

A.

Mailing Address 220 WELLS ROAD

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.17

Amount of Each Receipt this Period

1000.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

SIMPSON, ALAN K., , ,

B.

Mailing Address 1201 SUNSHINE AVE.

City

CODY

State

WY

Zip Code

82414

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.18

Amount of Each Receipt this Period

100.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MACK, DAVID S., , ,

C.

Mailing Address 2115 LINWOOD AVENUE
STE 110

City

FORT LEE

State

NJ

Zip Code

07024

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.20

Amount of Each Receipt this Period

2700.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) BENNETT, JAMES, D, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 925 PALM WAY ROAD			Transaction ID : SA12.61704.21	
City NORTH PALM BEACH	State FL	Zip Code 33408	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 350.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
B. Full Name (Last, First, Middle Initial) Feldenkreis, George, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 3000 NW 107th Avenue			Transaction ID : SA12.61704.22	
City Miami	State FL	Zip Code 33172	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Name of Employer Perry Ellis International		
Occupation CEO & Chairman		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 700.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
C. Full Name (Last, First, Middle Initial) GAY, JOHN, , , Jr.			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 44 COCONUT ROW B-104			Transaction ID : SA12.61704.23	
City PALM BEACH	State FL	Zip Code 33480	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 250.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
SUBTOTAL of Receipts This Page (optional)..... ▶			0.00	
TOTAL This Period (last page this line number only)..... ▶				

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

PAGE 124 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) HALLAUER, WILLIAM, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 91 SOUTHPONTE DR			Transaction ID : SA12.61704.24	
City FORT PIERCE	State FL	Zip Code 34949	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 300.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
B. Full Name (Last, First, Middle Initial) RANGOS, JOHN G., , , SR			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 701 OSPREY POINT CIRCLE			Transaction ID : SA12.61704.25	
City BOCA RATON	State FL	Zip Code 33431	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 1000.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
C. Full Name (Last, First, Middle Initial) Smith, Michael, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016	
Mailing Address 1063 Hillsboro Mile			Transaction ID : SA12.61704.26	
City Hillsboro Beach	State FL	Zip Code 33062	Amount of Each Receipt this Period _____ 200.00	
FEC ID number of contributing federal political committee. C		Name of Employer Nation Safe Drivers		
Occupation Insurance		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ _____ 400.00		<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
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)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) SMITH, ANDREW, , , Mailing Address 21169 OAKLEY COURT			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	6
M	M	/	D	D	/	Y	Y	Y	Y															
0	7		2	0		2	0	1	6															
City BOCA RATON			State FL																					
Zip Code 33433			Transaction ID : SA12.61704.28																					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>2000.00</td> </tr> </table>																					2000.00
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Name of Employer NATION SAFE DRIVERS			Occupation MANAGER																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>2000.00</td> </tr> </table>																					2000.00
									2000.00															
B. Full Name (Last, First, Middle Initial) HANLEY, DANIEL A., , , Mailing Address 417 SEABREEZE AVENUE			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	6
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0	7		2	0		2	0	1	6															
City PALM BEACH			State FL																					
Zip Code 33480			Transaction ID : SA12.61704.29																					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td> </tr> </table>																					250.00
									250.00															
Name of Employer RETIRED			Occupation RETIRED																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td> </tr> </table>																					250.00
									250.00															
C. Full Name (Last, First, Middle Initial) JOHNSON, CHARLES B., , , Mailing Address 1220 S. OCEAN BOULEVARD			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	6
M	M	/	D	D	/	Y	Y	Y	Y															
0	7		2	0		2	0	1	6															
City PALM BEACH			State FL																					
Zip Code 33480			Transaction ID : SA12.61704.30																					
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>2700.00</td> </tr> </table>																					2700.00
									2700.00															
Name of Employer RETIRED			Occupation RETIRED																					
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>2700.00</td> </tr> </table>																					2700.00
									2700.00															
SUBTOTAL of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>0.00</td> </tr> </table>											0.00										
									0.00															
TOTAL This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																					

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON, ANN L., , ,

Mailing Address 1220 S. OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.31

Amount of Each Receipt this Period

2700.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ABIOMED INC POLITICAL ACTION COMMITTEE (ABIOMED PAC)

Mailing Address 22 CHERRY HILL DRIVE

City DANVERS	State MA	Zip Code 01923
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00426445

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.32

Amount of Each Receipt this Period

5000.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STRONG COUNTRY FOR TODAY AND TOMORROW (SCOTTPAC)

Mailing Address ONE INTERNATIONAL PLACE, 44TH FL.
BOWDITCH & DEWEY, LLP

City BOSTON	State MA	Zip Code 02110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00560003

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.35

Amount of Each Receipt this Period

500.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

TROUTMAN SANDERS LLP POLITICAL ACTION COMMITTEE

Mailing Address 600 PEACHTREE STREET
SUITE 5200

City
ATLANTA

State
GA

Zip Code
30308

FEC ID number of contributing
federal political committee.

C C00311142

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.36

Amount of Each Receipt this Period

250.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

MCGARRY, MICHAEL A., , ,

Mailing Address 8595 HAVEN WOOD TRAIL

City
ROSWELL

State
GA

Zip Code
30076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

PSYCHOLOGIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : SA12.61704.37

Amount of Each Receipt this Period

250.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

Full Name (Last, First, Middle Initial)

COX, HOWARD, , ,

Mailing Address 356 WORTH AVENUE

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2016

Transaction ID : SA12.61704.38

Amount of Each Receipt this Period

2700.00

☒ Memo Item
CAMPAIGN CONTRIBUTION

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

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)
BRIAN MAST FOR CONGRESS

A. Full Name (Last, First, Middle Initial) KRONER, GENE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016		
Mailing Address 3300 MONET DRIVE WEST			Transaction ID : SA12.61704.39		
City	State	Zip Code	Amount of Each Receipt this Period 600.00		
PALM BEACH GARDENS	FL	33410	<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
FEC ID number of contributing federal political committee.		C			
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2600.00			
B. Full Name (Last, First, Middle Initial) KRONER, KAREN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2016		
Mailing Address 3300 MONET DRIVE WEST			Transaction ID : SA12.61704.40		
City	State	Zip Code	Amount of Each Receipt this Period 400.00		
PALM BEACH GARDENS	FL	33410	<input checked="" type="checkbox"/> Memo Item CAMPAIGN CONTRIBUTION		
FEC ID number of contributing federal political committee.		C			
Name of Employer HOMEMAKER		Occupation HOMEMAKER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00			
C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y Y		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
			<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)..... ▶			0.00		
TOTAL This Period (last page this line number only)..... ▶			10448.98		

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. A DELGADO REALTY & CONSULTING GROUP, INC.

Mailing Address 5521 EAGLE LAKE DRIVE

Date of Disbursement

M M / D D / Y Y Y Y
07 / 29 / 2016

City
PALM BEACH GARDENSState
FLZip Code
33418Purpose of Disbursement
CAMPAIGN SIGNS

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2770.72

Transaction ID : SB17.68973

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD, MD

Date of Disbursement

M M / D D / Y Y Y Y
08 / 04 / 2016

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
AIRFARE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

930.60

Transaction ID : SB17.69091

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD, MD

Date of Disbursement

M M / D D / Y Y Y Y
08 / 04 / 2016

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
AIRFARE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

89.98

Transaction ID : SB17.69092

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

3791.30

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ATT

Mailing Address 208 S. AKARD STREET

City
DALLASState
TXZip Code
75202Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

178.29

Transaction ID : SB17.69009

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ATT

Mailing Address 208 S. AKARD STREET

City
DALLASState
TXZip Code
75202Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

178.29

Transaction ID : SB17.69106

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CITY OF STUART

Mailing Address 121 SW FLAGLER AVE

City
STUARTState
FLZip Code
34994Purpose of Disbursement
SIGNAGE FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

152.94

Transaction ID : SB17.69023

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

509.52

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. COLORTREE GROUP INC.

Mailing Address 8000 VILLA PARK DR

City
RICHMONDState
VAZip Code
23228Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

5643.57

Transaction ID : SB17.69116

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLORTREE GROUP INC.

Mailing Address 8000 VILLA PARK DR

City
RICHMONDState
VAZip Code
23228Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1696.00

Transaction ID : SB17.69137

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COLORTREE GROUP INC.

Mailing Address 8000 VILLA PARK DR

City
RICHMONDState
VAZip Code
23228Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

10118.00

Transaction ID : SB17.69144

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

17457.57

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CORPORATE PRESS INC.

Mailing Address 9700 PHILADELPHIA COURT

City
LANHAMState
MDZip Code
20706Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1393.57

Transaction ID : SB17.69145

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CUMBERLAND

Mailing Address 2001 NE SAVANNAH RD

City
JENSEN BEACHState
FLZip Code
34957Purpose of Disbursement
CAMPAIGN MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

25.70

Transaction ID : SB17.69046

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CUMBERLAND

Mailing Address 2001 NE SAVANNAH RD

City
JENSEN BEACHState
FLZip Code
34957Purpose of Disbursement
CAMPAIGN MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

22.76

Transaction ID : SB17.69059

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

1442.03

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CUMBERLAND

Mailing Address 2001 NE SAVANNAH RD

City
JENSEN BEACHState
FLZip Code
34957Purpose of Disbursement
CAMPAIGN MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

20.93

Transaction ID : SB17.69070

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CUMBERLAND

Mailing Address 2001 NE SAVANNAH RD

City
JENSEN BEACHState
FLZip Code
34957Purpose of Disbursement
CAMPAIGN MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

21.06

Transaction ID : SB17.69080

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DARK HORSE STRATEGIESMailing Address 3663 SW 8 STREET
SUITE 205City
MIAMIState
FLZip Code
33135Purpose of Disbursement
DOOR HANGERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	12	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

565.00

Transaction ID : SB17.68967

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

606.99

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DARK HORSE STRATEGIESMailing Address 3663 SW 8 STREET
SUITE 205City
MIAMIState
FLZip Code
33135Purpose of Disbursement
DOOR HANGERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1100.00

Transaction ID : SB17.68970

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

933.18

Transaction ID : SB17.69128

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
SERVICE FEES - POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	21	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

168.30

Transaction ID : SB17.69129

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

2201.48

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	21	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

11220.00

Transaction ID : SB17.69130

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	21	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

14.94

Transaction ID : SB17.69131

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2851.48

Transaction ID : SB17.69132

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

14086.42

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	27	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1429.82

Transaction ID : SB17.69136

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Donate BucketMailing Address 1779 N. UNIVERSITY DRIVE
SUITE 102City
PEMBROKE PINESState
FLZip Code
33024Purpose of Disbursement
CC PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1602.85

Transaction ID : SB17.69159

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Donate BucketMailing Address 1779 N. UNIVERSITY DRIVE
SUITE 102City
PEMBROKE PINESState
FLZip Code
33024Purpose of Disbursement
CC PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

296.70

Transaction ID : SB17.69160

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

3329.37

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Donate BucketMailing Address 1779 N. UNIVERSITY DRIVE
SUITE 102City
PEMBROKE PINESState
FLZip Code
33024Purpose of Disbursement
CC PROCESSING FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

242.10

Transaction ID : SB17.69256

☐ Memo Item**B. DONORBUREAU**

Mailing Address 1900 N CULPEPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
STATISTICAL MODELING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1037.98

Transaction ID : SB17.69146

☐ Memo Item**C. EMILY FRIAS VIDEO**

Mailing Address 4305 NW 81ST TERRACE

City
CORAL SPRINGSState
FLZip Code
33065Purpose of Disbursement
VIDEO PRODUCTION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

767.89

Transaction ID : SB17.68955

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

2047.97

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. EXXONMOBIL

Mailing Address 2995 S. 25TH STREET

City
FORT PIERCEState
FLZip Code
34981Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

35.32

Transaction ID : SB17.69056

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EXXONMOBIL

Mailing Address 2995 S. 25TH STREET

City
FORT PIERCEState
FLZip Code
34981Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		02		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

20.81

Transaction ID : SB17.69084

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EXXONMOBIL

Mailing Address 2995 S. 25TH STREET

City
FORT PIERCEState
FLZip Code
34981Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		09		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

28.24

Transaction ID : SB17.69109

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

84.37

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

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

PAGE 139 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

41.74

Transaction ID : SB17.68990

☐ Memo Item**B. FACEBOOK**

Full Name (Last, First, Middle Initial)

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.01

Transaction ID : SB17.69074

☐ Memo Item**C. FACEBOOK**

Full Name (Last, First, Middle Initial)

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

13.70

Transaction ID : SB17.69076

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

805.45

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 PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

40.51

Transaction ID : SB17.69045

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : SB17.69055

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	27	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

34.50

Transaction ID : SB17.69064

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

114.41

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

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

PAGE 141 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

34.50

Transaction ID : SB17.69069

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

31.70

Transaction ID : SB17.68977

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	08	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

26.75

Transaction ID : SB17.69100

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

92.95

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 PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 2418 PONCE DE LEON BLVD

City
Coral GablesState
FLZip Code
33134Purpose of Disbursement
DELIVERY FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

34.50

Transaction ID : SB17.69111

☐ Memo Item**B. FIRST VIRGINIA COMMUNITY BANK**Mailing Address 11325 RANDOM HILLS RD
STE 240City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
BANK SERVICE CHARGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	11	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

290.39

Transaction ID : SB17.69115

☐ Memo Item**C. FIRST VIRGINIA COMMUNITY BANK**Mailing Address 11325 RANDOM HILLS RD
STE 240City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
BANK SERVICE CHARGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

375.64

Transaction ID : SB17.69143

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

700.53

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 PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULFILLMENT HOUSEMailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	06	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

5204.02

Transaction ID : SB17.69112

☐ Memo Item**B. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

-0.18

Transaction ID : SB17.69117

☐ Memo Item**C. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1812.76

Transaction ID : SB17.69118

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

7016.60

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULFILLMENT HOUSEMailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.69119

☐ Memo Item**B. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.69124

☐ Memo Item**C. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.69126

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

3902.70

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 PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULFILLMENT HOUSEMailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1951.27

Transaction ID : SB17.69127

☐ Memo Item**B. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : SB17.69138

☐ Memo Item**C. FULFILLMENT HOUSE**Mailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

6400.00

Transaction ID : SB17.69139

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

8352.27

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 PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULFILLMENT HOUSEMailing Address 22630 DULLES SUMMIT CT.
SUITE 190City
STERLINGState
VAZip Code
20166Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.69140

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GLOBAL PAYMENTS

Mailing Address 10705 RED RUN BLVD

City
ROCKVILLEState
MDZip Code
20855Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	11	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

423.87

Transaction ID : SB17.69114

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GLOBAL PAYMENTS

Mailing Address 10705 RED RUN BLVD

City
ROCKVILLEState
MDZip Code
20855Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	02	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

767.04

Transaction ID : SB17.69142

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

1193.61

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

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

PAGE 147 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY.COMMailing Address 14455 N. HAYDEN ROAD
SUITE 226City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
EMAIL FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

59.88

Transaction ID : SB17.69028

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HSP DIRECTMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
CREATIVE, PROD & PRGRM MGMT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2247.80

Transaction ID : SB17.69147

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. lcontactMailing Address 2121 RDU CENTER DRIVE
4TH FLOORCity
MORRISVILLEState
NCZip Code
27560Purpose of Disbursement
EMAIL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

149.00

Transaction ID : SB17.68994

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

2456.68

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. IcontactMailing Address 2121 RDU CENTER DRIVE
4TH FLOORCity
MORRISVILLEState
NCZip Code
27560Purpose of Disbursement
EMAIL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	02	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

149.00

Transaction ID : SB17.69081

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IMAGE DIRECTMailing Address 200 MONROE AVENUE
BUILDING 4City
FREDERICKState
MDZip Code
21701Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

4524.93

Transaction ID : SB17.69148

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 22695 COMMERCE CENTER COURT

City
DULLESState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	08	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

4829.37

Transaction ID : SB17.69157

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

9503.30

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	11	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

18364.65

Transaction ID : SB17.68981

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	18	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

18364.41

Transaction ID : SB17.68982

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1030.63

Transaction ID : SB17.68983

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

37759.69

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

18364.65

Transaction ID : SB17.68984

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	27	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

7245.21

Transaction ID : SB17.68985

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

7245.21

Transaction ID : SB17.68986

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

32855.07

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	02	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

7245.21

Transaction ID : SB17.68987

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KESSLER CREATIVEMailing Address 12276 SAN JOSE BLVD
#115City
JACKSONVILLEState
FLZip Code
32223Purpose of Disbursement
PRINTING - MAILERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

7245.21

Transaction ID : SB17.68988

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KRISTI COOPER

Mailing Address 4593 SE ONTARIO DRIVE

City
STUARTState
FLZip Code
34997Purpose of Disbursement
CAMPAIGN WORKER

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.68953

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

16490.42

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KRISTI COOPER

Mailing Address 4593 SE ONTARIO DRIVE

City
STUARTState
FLZip Code
34997Purpose of Disbursement
CAMPAIGN WORKER

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.68964

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEMS REALTY ASSOCIATES

Mailing Address 1330 SE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34997Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.68961

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARATHON

Mailing Address 3515 S. DIXIE HIGHWAY

City
WEST PALM BEACHState
FLZip Code
33405Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

20.87

Transaction ID : SB17.68993

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

4020.87

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARATHON

Mailing Address 3515 S. DIXIE HIGHWAY

City
WEST PALM BEACHState
FLZip Code
33405Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

23.39

Transaction ID : SB17.68999

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARATHON

Mailing Address 3515 S. DIXIE HIGHWAY

City
WEST PALM BEACHState
FLZip Code
33405Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	12	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

9.98

Transaction ID : SB17.69026

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARATHON

Mailing Address 3515 S. DIXIE HIGHWAY

City
WEST PALM BEACHState
FLZip Code
33405Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	02	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

27.03

Transaction ID : SB17.69083

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

60.40

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARTIN COUNTY REPUBLICAN EXECUTIVE COMMITTEEMailing Address 1111 SE FEDERAL HIGHWAY
SUITE 130City
STUARTState
FLZip Code
34995Purpose of Disbursement
ANNUAL EVENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.68960

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City
DULLESState
VAZip Code
20166Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2534.94

Transaction ID : SB17.69135

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MELINA PARDO

Mailing Address 14001 SW 112 STREET

City
MIAMIState
FLZip Code
33186Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	06	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2200.00

Transaction ID : SB17.68966

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

5234.94

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NOISEWORKS MEDIA

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	08	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

34938.00

Transaction ID : SB17.68957

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NOISEWORKS MEDIA

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

35008.00

Transaction ID : SB17.68968

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NOISEWORKS MEDIA

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

9985.00

Transaction ID : SB17.68969

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

79931.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NOISEWORKS MEDIA

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

44207.00

Transaction ID : SB17.68971

☐ Memo Item**B. NOISEWORKS MEDIA**

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

45001.00

Transaction ID : SB17.68976

☐ Memo Item**C. NOISEWORKS MEDIA**

Mailing Address 814 PONCE DE LEON BLVD, SUITE 204

City
CORAL GABLESState
FLZip Code
33134Purpose of Disbursement
MEDIA BUYS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

45236.00

Transaction ID : SB17.68980

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

134444.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NOVA LISTMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 190City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
MAILING LIST RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

431.91

Transaction ID : SB17.69113

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NOVA LISTMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 190City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
MAILING LIST RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

358.18

Transaction ID : SB17.69141

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NOVA LISTMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 190City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
MAILING LIST RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

4557.93

Transaction ID : SB17.69149

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

5348.02

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ONE STOP GURU

Mailing Address 1700 NW FEDERAL HIGHWAY

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

City
STUARTState
FLZip Code
34994Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

961.68

Transaction ID : SB17.68996

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONE STOP GURU

Mailing Address 1700 NW FEDERAL HIGHWAY

Date of Disbursement

M M	D D	Y Y Y Y
07	19	2016

City
STUARTState
FLZip Code
34994Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1956.60

Transaction ID : SB17.69034

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ONE STOP GURU

Mailing Address 1700 NW FEDERAL HIGHWAY

Date of Disbursement

M M	D D	Y Y Y Y
07	20	2016

City
STUARTState
FLZip Code
34994Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

73.39

Transaction ID : SB17.69044

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

2991.67

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ONE STOP GURU

Mailing Address 1700 NW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	26	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2033.65

Transaction ID : SB17.69061

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAVSNER PRESS

Mailing Address 9008 YELLOW BRICK ROAD

City
BALTIMOREState
MDZip Code
21237Purpose of Disbursement
PRINTING AND MAILSHOP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1023.36

Transaction ID : SB17.69120

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PINEAPPLE POSTMailing Address 280 VILLAGE MAIN STREET
#900City
PONTE VERDA BEACHState
FLZip Code
32082Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

295.00

Transaction ID : SB17.69030

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

3352.01

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. POSTAGE FOR DIRECT MAIL FUNDRAISINGMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

248.70

Transaction ID : SB17.69155

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Publix

Mailing Address 135 BRADLEY PL

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
CAMPAIGN MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.69063

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

41.00

Transaction ID : SB17.69033

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

389.70

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	19	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

32.31

Transaction ID : SB17.69038

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

23.00

Transaction ID : SB17.69052

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	03	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

27.00

Transaction ID : SB17.69086

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

82.31

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : SB17.69093

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

19.50

Transaction ID : SB17.69094

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RACETRAC

Mailing Address 1755 NE FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	09	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.69108

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

134.50

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RST MARKETING

Mailing Address 1272 CORPORATE PARK ROAD

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

City
FORESTState
VAZip Code
24551Purpose of Disbursement
POSTAGE & DELIVERY

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

0.75

Transaction ID : SB17.69150

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. RST MARKETING

Mailing Address 1272 CORPORATE PARK ROAD

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

City
FORESTState
VAZip Code
24551Purpose of Disbursement
PRINTING AND MAILSHOP

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2619.24

Transaction ID : SB17.69151

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. RST MARKETING

Mailing Address 1272 CORPORATE PARK ROAD

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

City
FORESTState
VAZip Code
24551Purpose of Disbursement
SHIPPING EXPENSE

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

37.00

Transaction ID : SB17.69152

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

2656.99

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 4696 OKEECHOBEE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

City
FORT PIERCEState
FLZip Code
34972Purpose of Disbursement
AUTO FUEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.05

Transaction ID : SB17.69032

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 4696 OKEECHOBEE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2016

City
FORT PIERCEState
FLZip Code
34972Purpose of Disbursement
AUTO FUEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.69

Transaction ID : SB17.69072

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 4696 OKEECHOBEE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
08	08	2016

City
FORT PIERCEState
FLZip Code
34972Purpose of Disbursement
AUTO FUEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

37.41

Transaction ID : SB17.69099

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

80.15

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

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

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 4696 OKEECHOBEE ROAD

Date of Disbursement

M M / D D / Y Y Y Y
08 / 08 / 2016

City
FORT PIERCEState
FLZip Code
34972Purpose of Disbursement
AUTO FUEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.37

Transaction ID : SB17.69101

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 4696 OKEECHOBEE ROAD

Date of Disbursement

M M / D D / Y Y Y Y
08 / 08 / 2016

City
FORT PIERCEState
FLZip Code
34972Purpose of Disbursement
AUTO FUEL

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.40

Transaction ID : SB17.69102

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. SIGNATURE PRINTING AND DESIGN, LLC

Mailing Address 420 W. 27TH STREET

Date of Disbursement

M M / D D / Y Y Y Y
08 / 10 / 2016

City
MIAMIState
FLZip Code
33010Purpose of Disbursement
PRINTING - BUMPER STICKERS

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.68979

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

317.77

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SPRINT

Mailing Address PO BOX 4191

City
CAROL STREAMState
ILZip Code
60197Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

114.63

Transaction ID : SB17.69022

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sunoco

Mailing Address 5151 OKEECHOBEE RD

City
FORT PIERCEState
FLZip Code
34937Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

24.43

Transaction ID : SB17.69065

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sunoco

Mailing Address 5151 OKEECHOBEE RD

City
FORT PIERCEState
FLZip Code
34937Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

17.40

Transaction ID : SB17.69103

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

156.46

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sunoco

Mailing Address 5151 OKEECHOBEE RD

City
FORT PIERCEState
FLZip Code
34937Purpose of Disbursement
AUTO FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	08	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

6.98

Transaction ID : SB17.69105

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	05	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

6.97

Transaction ID : SB17.69002

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	06	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

9.44

Transaction ID : SB17.69005

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

23.39

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

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

PAGE 168 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

37.08

Transaction ID : SB17.69013

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.69015

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

22.94

Transaction ID : SB17.69019

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

210.02

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

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

PAGE 169 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	19	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

153.97

Transaction ID : SB17.69035

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE HOME DEPOT

Mailing Address 3030 SW FEDERAL HIGHWAY

City
STUARTState
FLZip Code
34994Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

176.90

Transaction ID : SB17.69053

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED STATES POSTAL OFFICEMailing Address 900 BRENTWOOD RD
NE #118City
WASHINGTONState
DCZip Code
20066Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.69123

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

1330.87

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 PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL OFFICEMailing Address 900 BRENTWOOD RD
NE #118City
WASHINGTONState
DCZip Code
20066Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	18	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.69125

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES POSTAL OFFICEMailing Address 900 BRENTWOOD RD
NE #118City
WASHINGTONState
DCZip Code
20066Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	25	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.69133

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED STATES POSTAL OFFICEMailing Address 900 BRENTWOOD RD
NE #118City
WASHINGTONState
DCZip Code
20066Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	09	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.69158

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

5500.00

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

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

PAGE 171 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WAL-MART

Mailing Address 10855 US-1

City
PORT ST. LUCIEState
FLZip Code
34952Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

42.24

Transaction ID : SB17.68998

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WAL-MART

Mailing Address 10855 US-1

City
PORT ST. LUCIEState
FLZip Code
34952Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

23.60

Transaction ID : SB17.69041

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WAL-MART

Mailing Address 10855 US-1

City
PORT ST. LUCIEState
FLZip Code
34952Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

70.32

Transaction ID : SB17.69054

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

136.16

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

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

PAGE 172 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

City
CHANTILLYState
VAZip Code
20151Purpose of Disbursement
CAGING AND ESCROW

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

2799.45

Transaction ID : SB17.69121

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2016

City
CHANTILLYState
VAZip Code
20151Purpose of Disbursement
SHIPPING EXPENSE

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

52.51

Transaction ID : SB17.69122

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

M M	D D	Y Y Y Y
08	04	2016

City
CHANTILLYState
VAZip Code
20151Purpose of Disbursement
CAGING AND ESCROW

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

2429.37

Transaction ID : SB17.69153

☐ Memo Item

State:

District:

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

5281.33

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 PageFOR LINE NUMBER:
(check only one)

PAGE 173 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City
CHANTILLYState
VAZip Code
20151Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

69.93

Transaction ID : SB17.69154

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZILA VINYL GRAPHICS LLC

Mailing Address 203 NW ST. JAMES DRIVE

City
PORT ST. LUCIEState
FLZip Code
34983Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.69011

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZILA VINYL GRAPHICS LLC

Mailing Address 203 NW ST. JAMES DRIVE

City
PORT ST. LUCIEState
FLZip Code
34983Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

791.00

Transaction ID : SB17.69047

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

1560.93

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 PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 175

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

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NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ZILA VINYL GRAPHICS LLC

Mailing Address 203 NW ST. JAMES DRIVE

City
PORT ST. LUCIEState
FLZip Code
34983Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	09	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

532.50

Transaction ID : SB17.69107

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

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

532.50

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

420576.69

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

PAGE 175 OF 175

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

NAME OF COMMITTEE (In Full)

BRIAN MAST FOR CONGRESS

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

MAST, BRIAN, , ,

Nature of Debt (Purpose):

In-Kind Meals, Travel, Website- (Debt to be repaid)

Mailing Address PO BOX 3016

City

STUART

State

FL

Zip Code

34995

Outstanding Balance Beginning This Period

9499.36

Transaction ID : SD10.4417

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9499.36

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

9499.36

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

9499.36

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

0.00

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

9499.36