

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

BLAINE FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 1025

Check if different than previously reported. (ACC)

JEFFERSON CITY

MO

65102

2. **FEC IDENTIFICATION NUMBER** ▼

C C00458679

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

MO

03

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Brice A. Luetkemeyer

Signature of Treasurer Brice A. Luetkemeyer

[Electronically Filed]

Date

/ /

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BLAINE FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	176600.00	567123.27
(b) Total Contribution Refunds (from Line 20(d))	11200.00	24100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	165400.00	543023.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30077.77	166177.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	248.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	30077.77	165928.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	809282.12	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BLAINE FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	83400.00	218050.00
(ii) Unitemized.....	4200.00	5020.00
(iii) TOTAL of contributions from individuals ▶	87600.00	223070.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	89000.00	344053.27
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	176600.00	567123.27
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	10000.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	248.95
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1496.81
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	176600.00	578869.03

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30077.77	166177.38
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	5200.00	18100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	11200.00	24100.00
21. OTHER DISBURSEMENTS	73000.00	78000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	114277.77	268277.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	746959.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	176600.00
25. SUBTOTAL (add Line 23 and Line 24).....	923559.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	114277.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	809282.12

**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 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Holly Andrews

Mailing Address 1307 Sutton Dr.

City Columbia State MO Zip Code 65203

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

Name of Employer: Columbia Maxillofacial Surgery
Occupation: Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11AI.11931

Amount of Each Receipt this Period
250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Kathy A Baker

Mailing Address 6814 Fountain Lane

City Baton Rouge State LA Zip Code 70809

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

Name of Employer: Executive Hotel Management
Occupation: Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11AI.11927

Amount of Each Receipt this Period
1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Jordan M. Bernstein

Mailing Address 9336 Castle Hill Rd.

City Springfield State VA Zip Code 22153

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

Name of Employer: Cassidy & Associates
Occupation: Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : SA11AI.12204

Amount of Each Receipt this Period
500.00
Contribution

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. James Black		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 18 / 2013
Mailing Address 5890 S. Centerview Dr.		Transaction ID : SA11AI.12070
City Rochelle	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Maplehurst Farms	Occupation General Manager	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Marshall Branchman		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 634 A St. NE		Transaction ID : SA11AI.12193
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MARSHALL BRACHMAN & ASSOCIATES	Occupation Government Affairs Consultant	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Jennifer Bukowsky		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2013
Mailing Address 2140 Bluebird		Transaction ID : SA11AI.11846
City Columbia	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Bukowsky Law Firm	Occupation Attorney	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 7 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John C. Cleek		Date of Receipt M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 401 West Blvd North Ste. C		Transaction ID : SA11AI.11928	
City Columbia	State MO	Zip Code 65203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 Contribution	
Name of Employer Cleek's Inc.	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Sam B. Cook		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2013	
Mailing Address 238 Madison Street		Transaction ID : SA11AI.11895	
City Jefferson City	State MO	Zip Code 65101	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 Contribution	
Name of Employer Central Bank	Occupation Banker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Michael Dallmeyer		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013	
Mailing Address 716 E. High St.		Transaction ID : SA11AI.12138	
City Jefferson City	State MO	Zip Code 65101	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 Contribution	
Name of Employer Dallmeyer Law Firm	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carl R Doerhoff		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2013	
Mailing Address 5840 Foxfire Lane		Transaction ID : SA11AI.11893	
City Lohman	State MO	Zip Code 65053	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 500.00	
Name of Employer Surgicare of Missouri	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 500.00		

Full Name (Last, First, Middle Initial) B. Thomas P. Dresser		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013	
Mailing Address 3904 Frontenac Place		Transaction ID : SA11AI.11860	
City Columbia	State MO	Zip Code 65203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250.00	
Name of Employer VA and UM Hospitals	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 250.00		

Full Name (Last, First, Middle Initial) C. Patrick C. Dubbert		Date of Receipt M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 723 Turnberry Drive		Transaction ID : SA11AI.11933	
City Jefferson City	State MO	Zip Code 65109	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 1000.00	
Name of Employer Midwest Product Groups	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Patrick C. Dubbert		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013	
Mailing Address 723 Turnberry Drive		Transaction ID : SA11AI.12137	
City Jefferson City	State MO	Zip Code 65109	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Midwest Product Groups	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Jo Ann Emerson		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2013	
Mailing Address 1626 34th St.		Transaction ID : SA11AI.11950	
City Washington	State DC	Zip Code 20007	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Chief Executive Director	Occupation National Rural Electric Cooperative		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Tony Feather		Date of Receipt M M / D D / Y Y Y Y 11 / 22 / 2013	
Mailing Address 2720 Tanglewood Drive		Transaction ID : SA11AI.11938	
City Jefferson City	State MO	Zip Code 65109	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer FLS Connect	Occupation Consultant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 10 OF 67
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Harry Gallagher

Mailing Address 706 Hobbs Road

City State Zip Code
Jefferson City MO 65109

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

Name of Employer Occupation
Gallagher & Associates Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11934

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 5201 Kingston Pike

City State Zip Code
Knoxville TN 37919

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

Name of Employer Occupation
SPD Financial President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2013

Transaction ID : SA11AI.11890

Amount of Each Receipt this Period
 1250.00
 Contribution

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

Mailing Address 617 S. Eagle Trace

City State Zip Code
Jefferson City MO 65109

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.11960

Amount of Each Receipt this Period
 500.00
 Contribution

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Peter Goldschmidt

Mailing Address 705 Hobbs Rd.

City Jefferson City State MO Zip Code 65109

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

Name of Employer Capitol City Properties Occupation Real Estate & Land Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2013

Transaction ID : SA11AI.11896

Amount of Each Receipt this Period
 Contribution 500.00

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

Mailing Address 3081 Picket Post

City Columbia State MO Zip Code 65203

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11929

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 10409 Litzsinger Road

City St. Louis State MO Zip Code 63131

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

Name of Employer UBS Financial Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2013

Transaction ID : SA11AI.11883

Amount of Each Receipt this Period
 Contribution 2000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 67
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thomas R Highland

Mailing Address 3601 Southern Hills

City Columbia State MO Zip Code 65203

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

Name of Employer Columbia Orthopedic Group Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11930

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Terry M Jarrett

Mailing Address 501 Turnberry Drive

City Jefferson City State MO Zip Code 65109

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

Name of Employer Healy & Healy Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.11984

Amount of Each Receipt this Period
 250.00
 Contribution

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

Mailing Address 4629 Huntington Court

City Jefferson City State MO Zip Code 65101

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

Name of Employer Diamond Pet Food Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.12165

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mike Kampeter

Mailing Address 703 Turnberry Drive

City Jefferson City State MO Zip Code 65109

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

Name of Employer Diamond Pet Food Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11947

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Joseph Kayser

Mailing Address 1011 Southwest Blvd

City Jefferson City State MO Zip Code 65109

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

Name of Employer Self Occupation Chiropractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11949

Amount of Each Receipt this Period
 Contribution 500.00

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

Mailing Address 807 Southwest

City Jefferson City State MO Zip Code 65109

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

Name of Employer C bar K Ranch Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.11985

Amount of Each Receipt this Period
 Contribution 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark Kempker

Mailing Address 607 Dix Rd.

City Jefferson City State MO Zip Code 65109

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

Name of Employer Marks Mobile Glass Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11958

Amount of Each Receipt this Period
 250.00

Contribution

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

Mailing Address 13502 River Forest Pl

City St. Louis State MO Zip Code 63128

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

Name of Employer Southern Commerical Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 25 / 2013

Transaction ID : SA11AI.12183

Amount of Each Receipt this Period
 2600.00

Contribution

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

Mailing Address 13502 River Forest Pl.

City St. Louis State MO Zip Code 63128

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

Name of Employer Southern Commerical Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.12186

Amount of Each Receipt this Period
 2600.00

Contribution

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

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

Mailing Address 424 Meadow Brook Ct.

City Jefferson City State MO Zip Code 65109

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

Name of Employer J.C. Oil Company Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11948

Amount of Each Receipt this Period
 250.00
 Contribution

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

Mailing Address 214 Prodd Drive Suite 101

City Jefferson City State MO Zip Code 65109

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

Name of Employer Self Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11939

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 5609 Red Tail Ct.

City Lohman State MO Zip Code 65053

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11936

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) Brice A. Luetkemeyer		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013
Mailing Address PO Box 96		Transaction ID : SA11AI.12055
City St. Elizabeth	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Bank of St. Elizabeth	Occupation Banker	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) Brice A. Luetkemeyer		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2013
Mailing Address PO Box 96		Transaction ID : SA11AI.12056
City St. Elizabeth	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Bank of St. Elizabeth	Occupation Banker	Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) Michael Luxenberg		Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2013
Mailing Address 17 Crestwood Dr.		Transaction ID : SA11AI.11888
City West Orange	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer East Side Lenders	Occupation President	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	7700.00
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 17 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Julie Maschhoff

Mailing Address 18391 Post Oak Rd.

City State Zip Code
Carlyle IL 62231

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

Name of Employer Occupation
Maschhoff Farms Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.11980

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 2016 Woodhollow Drive

City State Zip Code
Columbia MO 65205

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11943

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
John A McMorris

Mailing Address 3 North Larand Drive

City State Zip Code
Holts Summit MO 65043

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

Name of Employer Occupation
American Family Insurance Agency Sales Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2013

Transaction ID : SA11AI.11891

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ann Michael

Mailing Address 412 Chrystal View Terr.

City Jefferson City State MO Zip Code 65109

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.12057

Amount of Each Receipt this Period
 Contribution 250.00

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

Mailing Address 3701 Applewood Creek Rd.

City Columbia State MO Zip Code 65203

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11942

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 1916 Sarah Lane

City Jefferson City State MO Zip Code 65101

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

Name of Employer NA Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11935

Amount of Each Receipt this Period
 Contribution 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) Dubart Neidert		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2013
Mailing Address 3701 Fairway Dr.		Transaction ID : SA11AI.11986
City Jefferson City	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Midwest Products	Occupation CEO	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Beth Orscheln		Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2013
Mailing Address 4016 Glen Eagle Dr.		Transaction ID : SA11AI.12053
City Columbia	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer N/A	Occupation Homemaker	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) Mary Orscheln		Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2013
Mailing Address PO Box 280		Transaction ID : SA11AI.12044
City Moberly	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer N/A	Occupation Homemaker	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	5700.00
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 20 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert J Orscheln

Mailing Address 4016 Glen Eagle Dr.

City Columbia State MO Zip Code 65203

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

Name of Employer Orscheln Products LLC Occupation Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11AI.12018

Amount of Each Receipt this Period
 Contribution 2600.00

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

Mailing Address not provided

City Moberly State MO Zip Code 65203

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

Name of Employer Orscheln Mgmt Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11AI.12043

Amount of Each Receipt this Period
 Contribution 2600.00

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

Mailing Address 42150 High Point Rd

City Russellville State MO Zip Code 65074

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

Name of Employer Patek And Associates Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.12130

Amount of Each Receipt this Period
 Contribution 500.00

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Larry Potterfield		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 8251 West Highway 40		Transaction ID : SA11AI.11861
City Columbia	State MO	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 1000.00
Name of Employer Midway USA	Occupation Co-Owner	Amount of Each Receipt this Period Contribution 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Andrew Puzder		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 570 Meadow Wood Lane		Transaction ID : SA11AI.12132
City Montecito	State CA	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 2600.00
Name of Employer CKE Restaurants	Occupation CEO	Amount of Each Receipt this Period Contribution 2600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. Deanna Puzder		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 570 Meadow Wood Lane		Transaction ID : SA11AI.12135
City Montecito	State CA	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period Contribution 2600.00
Name of Employer Unemployed	Occupation Attorney	Amount of Each Receipt this Period Contribution 2600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Samuel C. Richardson

Mailing Address 816 Gilman

City Moberly State MO Zip Code 65270

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

Name of Employer Self Employed Occupation Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 12 / 2013

Transaction ID : SA11AI.11862

Amount of Each Receipt this Period
 Contribution 250.00

B. Full Name (Last, First, Middle Initial)
Kevin L Riley

Mailing Address 5815 Red Tail Ct

City Lohman State MO Zip Code 65053

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

Name of Employer Riley Bros. LLC Occupation Owner/Car Dealership

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.12125

Amount of Each Receipt this Period
 Contribution 500.00

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

Mailing Address 3215 Pembroke Sq

City Jefferson City State MO Zip Code 65109

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

Name of Employer JCMG Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.12058

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert M. Robuck

Mailing Address 418 Crystal View Terrace

City Jefferson City State MO Zip Code 65109

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

Name of Employer Central Trust Bank Occupation Retired, former President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.11990

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 266 Pennington Ln

City Chesterfield State MO Zip Code 63005

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

Name of Employer Regulatory & Congeneration Ser Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 26 / 2013

Transaction ID : SA11AI.11894

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 2415 Saddlebrooke Lake Road

City Lohman State MO Zip Code 65033

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

Name of Employer Diamond Pet Food Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 26 / 2013

Transaction ID : SA11AI.11892

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mildred M. Schell

Mailing Address 415 Turnberry Drive

City Jefferson City State MO Zip Code 65109

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.11993

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 817 Weatherhill Road

City Jefferson City State MO Zip Code 65109

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

Name of Employer Nit Scheppers Dist. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.11994

Amount of Each Receipt this Period
 1000.00
 Contribution

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

Mailing Address 730 Turnberry Dr.

City Jefferson City State MO Zip Code 65109

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

Name of Employer Scruggs Lumber Co. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.11996

Amount of Each Receipt this Period
 250.00
 Contribution

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Barbara Sheehan

Mailing Address 3138 Williamsburg Way

City Jefferson City State MO Zip Code 65109

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

Name of Employer Williams-Keepers Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11AI.11997

Amount of Each Receipt this Period
 Contribution 250.00

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.12128

Amount of Each Receipt this Period
 Contribution 2600.00

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

Mailing Address 244 Bent Walnut

City Westphalia State MO Zip Code 65085

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.12129

Amount of Each Receipt this Period
 Contribution 2600.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rex Sinuefield		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2013
Mailing Address 244 Bent Walnut		Transaction ID : SA11AI.12126
City Westphalia	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Show Me Institute	Occupation President	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. Rex Sinuefield		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2013
Mailing Address 244 Bent Walnut		Transaction ID : SA11AI.12127
City Westphalia	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Show Me Institute	Occupation President	Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) C. Donn Sorensen		Date of Receipt M M / D D / Y Y Y Y Y 10 / 21 / 2013
Mailing Address 155 Carondelet Plaza Unit 302		Transaction ID : SA11AI.11848
City Clayton	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mercy	Occupation President	Contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 27 OF 67
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
W. Jason Van Eaton

Mailing Address 4702 Winding Wood Ct.

City Columbia State MO Zip Code 65203

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

Name of Employer Spectrum Consulting Group Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.11941

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 284 St. Georges
PO Box 618

City St. Albans State MO Zip Code 63073

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

Name of Employer FRED WEBER INC. Occupation Chairman/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11AI.12046

Amount of Each Receipt this Period
 Fred Weber, INC. 2500.00

C. Full Name (Last, First, Middle Initial)
Harold W. Westhues

Mailing Address 205 Ronnie

City Jefferson City State MO Zip Code 65109

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

Name of Employer Jefferson Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 12 / 2013

Transaction ID : SA11AI.11863

Amount of Each Receipt this Period
 Contribution 500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 67
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dana M Wilbers

Mailing Address 6814 Route W

City Jefferson City State MO Zip Code 65101

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

Name of Employer Mid-America Wireless Occupation Self-employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2013

Transaction ID : SA11Al.11897

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

83400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

A. Mailing Address 2722 EAST MCCARTY
City JEFFERSON CITY State MO Zip Code 65101

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation C00008169

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2013
Transaction ID : SA11C.12013

Amount of Each Receipt this Period
Contribution 2000.00

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

B. Mailing Address 2722 EAST MCCARTY
City JEFFERSON CITY State MO Zip Code 65101

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation C00008169

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2013
Transaction ID : SA11C.12205

Amount of Each Receipt this Period
Contribution 2500.00

Full Name (Last, First, Middle Initial)
AGRICULTURAL RETAILERS ASSOCIATION POLITICAL ACTION COMMITTEE

C. Mailing Address 1156 15th Street, NW Suite 302
City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00264770

Name of Employer Occupation C00264770

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 20 / 2013
Transaction ID : SA11C.12154

Amount of Each Receipt this Period
Contribution 1000.00

SUBTOTAL of Receipts This Page (optional)..... 5500.00
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 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLIANZ OF AMERICA CORPORATION/FIREMAN'S FUND POLITICAL ACTION COMMITTEE

Mailing Address 1101 CONNECTICUT AVE., NW
SUITE 950

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00095109

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : SA11C.12155

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
AMEREN FEDERAL POLITICAL ACTION COMMITTEE (AMERENFED PAC)

Mailing Address 1331 Pennsylvania Ave., NW
Suite 550S

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11C.11923

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE., NW
SUITE 700

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : SA11C.12156

Amount of Each Receipt this Period
 1000.00
 Contribution

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

3000.00

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 31 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Electric Power

Mailing Address 1 Riverside Plaza

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C C00096842**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11C.12039

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11C.11922

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN MEAT INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1150 Connecticut Avenue, NW
Suite 1200

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00024281**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : SA11C.12036

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN WATER WORKS COMPANY, INC. FEDERAL PAC A/K/A AMERICAN WATER FEDERAL PAC

Mailing Address P.O. BOX 1770

City: VOORHEES State: NJ Zip Code: 08043

FEC ID number of contributing federal political committee: **C** C00354548

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 20 / 2013

Transaction ID : SA11C.12163

Amount of Each Receipt this Period: 500.00

Contribution

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

Mailing Address PO BOX 190033

City: ST LOUIS State: MO Zip Code: 63119

FEC ID number of contributing federal political committee: **C** C00416404

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 11 / 26 / 2013

Transaction ID : SA11C.12003

Amount of Each Receipt this Period: 1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
ASSURANT INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 WEST MICHIGAN STREET

City: MILWAUKEE State: WI Zip Code: 53203

FEC ID number of contributing federal political committee: **C** C00185694

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 11 / 20 / 2013

Transaction ID : SA11C.12160

Amount of Each Receipt this Period: 1000.00

Contribution

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLANK ROME PAC

Mailing Address 600 NEW HAMPSHIRE AVENUE, NW

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00150797**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 13 2013

Transaction ID : SA11C.12032

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
BOEING COMPANY POLITICAL ACTION COMMITTEE, THE

Mailing Address 1200 Wilson Blvd

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 27 2013

Transaction ID : SA11C.12006

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)

Mailing Address 1201 15th Street, NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 08 2013

Transaction ID : SA11C.12208

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2013

Transaction ID : SA11C.12198

Amount of Each Receipt this Period
 _____ 1000.00
 Contribution

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		28		2013

Transaction ID : SA11C.12008

Amount of Each Receipt this Period
 _____ 5000.00
 Contribution

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer	Occupation

Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 10000.00
---	--

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2013

Transaction ID : SA11C.12041

Amount of Each Receipt this Period
 _____ 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....	_____ 11000.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 35 OF 67
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD JONES PAC

Mailing Address 12555 MANCHESTER ROAD

City State Zip Code
ST. LOUIS MO 63131

FEC ID number of contributing federal political committee. **C C00410407**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 23 2013

Transaction ID : SA11C.12122

Amount of Each Receipt this Period
1000.00
Contribution

B. Full Name (Last, First, Middle Initial)
EQUIFAX INC. POLITICAL ACTION COMMITTEE

Mailing Address 1550 PEACHTREE STREET NW

City State Zip Code
ATLANTA GA 30309

FEC ID number of contributing federal political committee. **C C00143867**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 31 2013

Transaction ID : SA11C.12188

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ERIE INDEMNITY COMPANY PAC - FEDERAL

Mailing Address 100 ERIE INSURANCE PLACE

City State Zip Code
ERIE PA 16530

FEC ID number of contributing federal political committee. **C C00153577**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 13 2013

Transaction ID : SA11C.12034

Amount of Each Receipt this Period
1000.00
Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 E MAIN STREET
SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11C.12145

Amount of Each Receipt this Period
 Contribution 5000.00

B. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 E MAIN STREET
SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11C.12146

Amount of Each Receipt this Period
 Contribution 5000.00

C. Full Name (Last, First, Middle Initial)
EXPERIAN NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (EXPERIAN PAC)

Mailing Address 475 ANTON BLVD

City COSTA MESA State CA Zip Code 92626

FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11C.11918

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 67
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 13 / 2013

Transaction ID : SA11C.12016

Amount of Each Receipt this Period
Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 13 / 2013

Transaction ID : SA11C.12017

Amount of Each Receipt this Period
Contribution 500.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900W

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 27 / 2013

Transaction ID : SA11C.12005

Amount of Each Receipt this Period
Contribution 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 67
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HALLMARK CARDS PAC

Mailing Address 2501 McGee
MD #288

City Kansas City State MO Zip Code 64108

FEC ID number of contributing federal political committee. **C** C00000059

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11C.12196

Amount of Each Receipt this Period
Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
HUSCH BLACKWELL SANDERS POLITICAL ACTION COMMITTEE

Mailing Address 4801 MAIN STREET SUITE 1000

City KANSAS CITY State MO Zip Code 64112

FEC ID number of contributing federal political committee. **C** C00424382

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2013

Transaction ID : SA11C.11886

Amount of Each Receipt this Period
Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
JOBS, ECONOMY AND BUDGET FUND (JEB FUND)

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11C.12191

Amount of Each Receipt this Period
CONTRIBUTION 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAND O'LAKES INC/AGRILIANCE LLC PAC (LOL PAC) FKA LAND O'LAKE INC PAC

Mailing Address BOX 64101

City ST PAUL State MN Zip Code 55164

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11C.12037

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY - PAC

Mailing Address 175 BERKELEY STREET

City BOSTON State MA Zip Code 02117

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 27 / 2013

Transaction ID : SA11C.12007

Amount of Each Receipt this Period
 Contribution 2000.00

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

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00446625

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : SA11C.12162

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 67
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City State Zip Code
SPRINGFIELD MA 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2013

Transaction ID : SA11C.12152

Amount of Each Receipt this Period
Contribution 2500.00

B. Full Name (Last, First, Middle Initial)
NAT'L TELECOMMUNICATIONS COOPERATIVE ASSN./TELECOMMUNICATIONS EDUCATION COMMITTEE ORG.

Mailing Address 4121 WILSON BLVD.
10TH FLOOR

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date 6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 13 / 2013

Transaction ID : SA11C.12027

Amount of Each Receipt this Period
Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 20 / 2013

Transaction ID : SA11C.12148

Amount of Each Receipt this Period
Contribution 500.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES ROAD
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11C.12062

Amount of Each Receipt this Period
 2500.00

C00201871

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2010.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11C.11920

Amount of Each Receipt this Period
 1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City CENTENNIAL State CO Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2013

Transaction ID : SA11C.12206

Amount of Each Receipt this Period
 1000.00

Contribution

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 67			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00002238**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2013

Transaction ID : SA11C.12028

Amount of Each Receipt this Period
 Contribution 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL GRAIN AND FEED ASSOCIATION'S FUND FOR BETTER GOVERNMENT COMMITTEE/GRAINPAC

Mailing Address 1250 EYE STREET SUITE 1003

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00240226**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11C.12121

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL GROCERS ASSOCIATION GROCERS PAC

Mailing Address 1005 NORTH GLEBE ROAD SUITE 250

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00508770**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11C.12014

Amount of Each Receipt this Period
 Contribution 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW, SUITE 540

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2013

Transaction ID : SA11C.12030

Amount of Each Receipt this Period
 Contribution 2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL PORK PRODUCERS COUNCIL PORK PAC

Mailing Address P.O. BOX 10383

City DES MOINES State IA Zip Code 50306

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11C.12001

Amount of Each Receipt this Period
 Contribution 1000.00

C. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11C.11921

Amount of Each Receipt this Period
 Contribution 2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POLSINELLI PAC

Mailing Address 700 WEST 47TH STREET
SUITE 1000

City KANSAS CITY State MO Zip Code 64112

FEC ID number of contributing federal political committee. **C C00445981**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11C.11916

Amount of Each Receipt this Period
 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
QUICKEN LOANS INC PAC

Mailing Address 101 S WASHINGTON SQ SUITE 620
101 S. WASHINGTON SQUARE STE 620

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11C.11919

Amount of Each Receipt this Period
 1000.00
 Contribution

C. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1900 5TH AVENUE NORTH
6TH FLOOR

City BIRMINGHAM State AL Zip Code 35203

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11C.12190

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RELY ON YOUR BELIEFS FUND

Mailing Address 209 PENNSYLVANIA AVENUE, SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00344648

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2013

Transaction ID : SA11C.12009

Amount of Each Receipt this Period
 5000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
RG REINSURANCE COMPANY FEDERAL PAC

Mailing Address 1370 TIMBERLAKE MANOR PARKWAY

City CHESTERFIELD State MO Zip Code 63017

FEC ID number of contributing federal political committee. **C** C00461129

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013

Transaction ID : SA11C.12031

Amount of Each Receipt this Period
 2500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
SHELTER MUTUAL INSURANCE COMPANY FEDERAL PAC

Mailing Address 1817 WEST BROADWAY

City COLUMBIA State MO Zip Code 65218

FEC ID number of contributing federal political committee. **C** C00140384

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11C.11944

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 46 OF 67
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SOCIETY OF AMERICAN FLORISTS POLITICAL ACTION COMMITTEE

Mailing Address 1601 DUKE STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00111302

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 20 2013

Transaction ID : SA11C.12150

Amount of Each Receipt this Period
1000.00
Contribution

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

Mailing Address 919 E MAIN STREET

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing federal political committee. **C** C00386524

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 19 2013

Transaction ID : SA11C.12052

Amount of Each Receipt this Period
2000.00
Contribution

C. Full Name (Last, First, Middle Initial)
TITLE INDUSTRY POLITICAL ACTION COMMITTEE

Mailing Address 1828 L ST NW
SUITE 705

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 17 2013

Transaction ID : SA11C.12038

Amount of Each Receipt this Period
1000.00
Contribution

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
USA RICE FEDERATION PAC

Mailing Address 4301 NORTH FAIRFAX DRIVE SUITE 425

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00308478

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11C.12123

Amount of Each Receipt this Period
 Contribution 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

89000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 896.49 Transaction ID : SB17.11868
City Dallas State TX Zip Code 75265	Purpose of Disbursement Credit Card: See Below	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Vonage		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address www.vonage.com		Amount of Each Disbursement this Period 66.16 Transaction ID : SB17.11868.0
City Homdell State NJ Zip Code 07733	Purpose of Disbursement Phone	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 784.33 Transaction ID : SB17.11899
City Dallas State TX Zip Code 75265	Purpose of Disbursement Itemized: See Below	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	896.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vonage		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address www.vonage.com		Amount of Each Disbursement this Period 65.79
City Homdell	State NJ	
Zip Code 07733	Purpose of Disbursement Phone	Transaction ID : SB17.11899.0
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Accurate Word, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address PO Box 1765		Amount of Each Disbursement this Period 670.95
City White Plains	State MD	
Zip Code 20695	Purpose of Disbursement Publishing & Printing	Transaction ID : SB17.11899.3
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: MO District: 03		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 235.55
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Credit Card: See Below	Transaction ID : SB17.11972
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	235.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vonage		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address www.vonage.com		Amount of Each Disbursement this Period 65.79
City Homdell	State NJ	Zip Code 07733
Purpose of Disbursement Phone	Category/ Type	
Candidate Name BLAINE FOR CONGRESS		Transaction ID : SB17.11972.0 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 03	

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 1300 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 7.53
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Shipping	Category/ Type	
Candidate Name BLAINE FOR CONGRESS		Transaction ID : SB17.11972.2 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 03	

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 1300 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 17.67
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Shipping	Category/ Type	
Candidate Name BLAINE FOR CONGRESS		Transaction ID : SB17.11972.3 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1300 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 18.72
City Washington State DC Zip Code 20004	Purpose of Disbursement Shipping	Transaction ID : SB17.11972.4
Candidate Name BLAINE FOR CONGRESS	Category/Type	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1300 Pennsylvania Ave. NW		Amount of Each Disbursement this Period -1.87
City Washington State DC Zip Code 20004	Purpose of Disbursement Credit Voucher-Shipping	Transaction ID : SB17.11972.5
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bogart Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 3000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Fundraising Consulting Fee	Transaction ID : SB17.11869
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bogart Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.11874
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Consulting Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. Bogart Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 263.12 Transaction ID : SB17.11876
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Expense Reimbursement: See Below	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1300 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 263.12 Transaction ID : SB17.11876.0 [MEMO ITEM]
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Shipping	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

SUBTOTAL of Disbursements This Page (optional).....	3263.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bogart Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 5013.00 Transaction ID : SB17.11905
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Itemized: See Below	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. Bogart Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.11905.0 [MEMO ITEM]
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Consulting Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) c. Acqua AI 2		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 212 7th Street, SE		Amount of Each Disbursement this Period 2013.00 Transaction ID : SB17.11905.1 [MEMO ITEM]
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Event Food & Beverage	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

SUBTOTAL of Disbursements This Page (optional).....	5013.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lori Boyken		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 1909 Clear Ct.		Amount of Each Disbursement this Period 266.68 Transaction ID : SB17.11871
City Columbia	State MO	
Zip Code 65203		Category/ Type
Purpose of Disbursement Mileage Reimbursement		
Candidate Name BLAINE FOR CONGRESS		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. Capital Enhancement, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 150 Long Road Suite 50		Amount of Each Disbursement this Period 4580.00 Transaction ID : SB17.11898
City Chesterfield	State MO	
Zip Code 63005		Category/ Type
Purpose of Disbursement Fundraising Consulting Fee		
Candidate Name BLAINE FOR CONGRESS		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 03	

Full Name (Last, First, Middle Initial) c. Capital Hill Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 300 First Street S.E.		Amount of Each Disbursement this Period 1335.84 Transaction ID : SB17.11967
City Washington	State DC	
Zip Code 20003		Category/ Type
Purpose of Disbursement Political Meals & Dues		
Candidate Name BLAINE FOR CONGRESS		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 03	

SUBTOTAL of Disbursements This Page (optional).....	6182.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 67			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 1161.60 Transaction ID : SB17.11870
City Washington State DC Zip Code 20003	Purpose of Disbursement Political meals & Dues	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 398.56 Transaction ID : SB17.11900
City Washington State DC Zip Code 20003	Purpose of Disbursement Political meals & Dues	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) C. Connect Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address PO Box 141251		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.11903
City Dallas State TX Zip Code 75214	Purpose of Disbursement Website Hosting	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	1805.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Connect Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address PO Box 141251		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.11965
City Dallas State TX Zip Code 75214	Purpose of Disbursement Website Hosting	
Candidate Name BLAINE FOR CONGRESS Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Jeremy Ketterer		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address PO Box 171		Amount of Each Disbursement this Period 155.50 Transaction ID : SB17.11973
City Jefferson City State MO Zip Code 65102	Purpose of Disbursement Mileage Reimbursement	
Candidate Name BLAINE FOR CONGRESS Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) C. W BLAINE LUETKEMEYER		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 215 MAIN STREET		Amount of Each Disbursement this Period 633.20 Transaction ID : SB17.11904
City ST ELIZABETH State MO Zip Code 65075	Purpose of Disbursement Expense Reimbursement	
Candidate Name BLAINE FOR CONGRESS Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	837.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. W BLAINE LUETKEMEYER		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address 215 MAIN STREET		Amount of Each Disbursement this Period 948.89 Transaction ID : SB17.11904.1
City ST ELIZABETH State MO Zip Code 65075	Purpose of Disbursement Mileage Reimbursement	
Candidate Name BLAINE FOR CONGRESS		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Madison's Cafe		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 216 Madison Street		Amount of Each Disbursement this Period 916.01 Transaction ID : SB17.11964
City Jefferson City State MO Zip Code 65101	Purpose of Disbursement Event: Food & Beverage	
Candidate Name BLAINE FOR CONGRESS		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.11855
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	945.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.11850
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.11851
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 11.25 Transaction ID : SB17.11864
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

SUBTOTAL of Disbursements This Page (optional).....	101.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.11865
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 11.25 Transaction ID : SB17.11866
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) C. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 22.50 Transaction ID : SB17.11867
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	78.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.12175
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 22.50 Transaction ID : SB17.11961
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 4.50 Transaction ID : SB17.12176
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	29.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 Second Street		Amount of Each Disbursement this Period 22.50 Transaction ID : SB17.12177
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type
Candidate Name BLAINE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Save on Mail, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1090 Crosswinds Ct.		Amount of Each Disbursement this Period 141.59 Transaction ID : SB17.11875
City Wentzville	State MO Zip Code 63385	
Purpose of Disbursement Postage		Category/ Type
Candidate Name BLAINE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) c. Save on Mail, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 1090 Crosswinds Ct.		Amount of Each Disbursement this Period 216.59 Transaction ID : SB17.11902
City Wentzville	State MO Zip Code 63385	
Purpose of Disbursement Postage		Category/ Type
Candidate Name BLAINE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	380.68
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 Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. the Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 2276.02 Transaction ID : SB17.11857
City Columbia	State MO	
Zip Code 65201	Purpose of Disbursement FEC Compliance Fee	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. the Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 78.30 Transaction ID : SB17.11858
City Columbia	State MO	
Zip Code 65201	Purpose of Disbursement Expense Reimbursement	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) c. the Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2013
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 2250.00 Transaction ID : SB17.11859
City Columbia	State MO	
Zip Code 65201	Purpose of Disbursement FEC Compliance	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

SUBTOTAL of Disbursements This Page (optional).....	4604.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 67			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. the Bespoke Group		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 2250.00 Transaction ID : SB17.11962
City Columbia	State MO	
Zip Code 65201	Purpose of Disbursement FEC Compliance	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

Full Name (Last, First, Middle Initial) B. Thomson Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 601 North Kingshighway		Amount of Each Disbursement this Period 322.35 Transaction ID : SB17.11901
City St. Charles	State MO	
Zip Code 63301	Purpose of Disbursement Printing	Category/ Type
Candidate Name BLAINE FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

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

SUBTOTAL of Disbursements This Page (optional).....	2572.35
TOTAL This Period (last page this line number only).....	29945.15

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 67	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brice A. Luetkemeyer		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address PO Box 96		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20A.12223
City St. Elizabeth	State MO	
Zip Code 65075	Purpose of Disbursement Refund Contribution: Individual	Category/ Type
Candidate Name BLAINE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 03	

Full Name (Last, First, Middle Initial) B. Brice A. Luetkemeyer		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address PO Box 96		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20A.12224
City St. Elizabeth	State MO	
Zip Code 65075	Purpose of Disbursement Refund Contribution: Individual	Category/ Type
Candidate Name BLAINE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO	District: 03	

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

SUBTOTAL of Disbursements This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 67	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

A. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION Full Name (Last, First, Middle Initial) Mailing Address 8400 WESTPARK DRIVE		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
City State Zip Code MCLEAN VA 22102	Purpose of Disbursement Stop Payment	Amount of Each Disbursement this Period 5000.00 Transaction ID : SB20C.12218
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

B. FARMERS GROUP, INC. POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address 2350 KERNER BLVD., SUITE 250		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
City State Zip Code SAN RAFAEL CA 94901	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1000.00 Transaction ID : SB20C.11856
Candidate Name BLAINE FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MO District: 03	

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

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 67
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Citizens to Elect Waller		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 725 Maple St.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12173
City Hillsboro State MO Zip Code 63050	Purpose of Disbursement Contribution	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. Coffman for Congress		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 9249 South Broadway Suite 200-501		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12210
City Highlands Ranch State CO Zip Code 80129	Purpose of Disbursement Contribution	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 35000.00 Transaction ID : SB21.12213
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Contribution	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

SUBTOTAL of Disbursements This Page (optional).....	37000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 67	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BLAINE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 35000.00 Transaction ID : SB21.12212
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Contribution	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

Full Name (Last, First, Middle Initial) B. St. Charles County Republican Central Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 5 Conestoga Court		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12216
City O'Fallon State MO Zip Code 63368	Purpose of Disbursement Sponsorship/Advertising	
Candidate Name BLAINE FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MO District: 03		

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

SUBTOTAL of Disbursements This Page (optional).....	36000.00
TOTAL This Period (last page this line number only).....	73000.00