

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 TED YOHO FOR CONGRESS

ADDRESS (number and street) 5745 SW 75TH STREET, #283 GAINESVILLE FL 32608

2. FEC IDENTIFICATION NUMBER C C00494583 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT FL 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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2017 through M M / D D / Y Y Y Y 03 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JACKSON, LAURA, , , Type or Print Name of Treasurer Signature of Treasurer JACKSON, LAURA, , , [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 06 / 2017

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TED YOHO 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))....	15050.00	17500.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	150.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15050.00	17350.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	38701.10	119968.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	393.62	5868.47
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38307.48	114100.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	103537.38	
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 05/2016)

Write or Type Committee Name

TED YOHO 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).....	2850.00	4250.00
(ii) Unitemized.....	200.00	250.00
(iii) TOTAL of contributions from individuals ▶	3050.00	4500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	13000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15050.00	17500.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	393.62	5868.47
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15443.62	23368.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38701.10	119968.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	150.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	150.00
21. OTHER DISBURSEMENTS	3000.00	3250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41701.10	123368.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	129794.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15443.62
25. SUBTOTAL (add Line 23 and Line 24).....	145238.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41701.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	103537.38

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

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FLETCHER, GEORGE, E., MR.,

Mailing Address 1223 NW 114 DR.

City GAINESVILLE	State FL	Zip Code 32606
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FEC ID number of contributing federal political committee. **C**

Name of Employer GEORGE E. FLETCHER, INC	Occupation PRESIDENT
---------------------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2017

Transaction ID : SA11AI.19839

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 602 NW 75TH STREET SUITE C

City GAINESVILLE	State FL	Zip Code 32607
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FEC ID number of contributing federal political committee. **C**

Name of Employer BIG DADDY ENTERPRISES	Occupation MARKETING
-------------------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2017

Transaction ID : SA11AI.19745

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 602 NW 75TH STREET SUITE C

City GAINESVILLE	State FL	Zip Code 32607
---------------------	-------------	-------------------

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

Name of Employer BIG DADDY ENTERPRISES	Occupation MARKETING
-------------------------------------------	-------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2017

Transaction ID : SA11AI.19791

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1900.00
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 6 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCKNIGHT, TONY, , ,

Mailing Address **602 NW 75TH STREET
SUITE C**

City **GAINESVILLE** State **FL** Zip Code **32607**

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

Name of Employer **BIG DADDY ENTERPRISES** Occupation **MARKETING**

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2017

Transaction ID : SA11AI.19836

Amount of Each Receipt this Period
450.00

Memo Item

B. Full Name (Last, First, Middle Initial)
YOHO, TIM, , MR.,

Mailing Address **W8304 BALD EAGLE DR.**

City **TREGO** State **WI** Zip Code **54888**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2017

Transaction ID : SA11AI.19838

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE BUSCH PLACE 202-7

City ST. LOUIS	State MO	Zip Code 63118
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FEC ID number of contributing federal political committee. **C** C00034488

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2017

Transaction ID : SA11C.19833

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE BUSCH PLACE 202-7

City ST. LOUIS	State MO	Zip Code 63118
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FEC ID number of contributing federal political committee. **C** C00034488

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2017

Transaction ID : SA11C.19834

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 4800 W. GATES PASS ROAD

City TUCSON	State AZ	Zip Code 85745
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FEC ID number of contributing federal political committee. **C** C00122101

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2017

Transaction ID : SA11C.19835

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12000.00
TOTAL This Period (last page this line number only)..... ▶	12000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WGFL

Mailing Address 1703 NW 80TH BLVD

City Gainesville State FL Zip Code 32606

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2017

Transaction ID : SA14.19748

Amount of Each Receipt this Period
 365.00

Memo Item
REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	365.00
TOTAL This Period (last page this line number only).....▶	365.00

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

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2017		
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C		
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 5108.93		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.19752		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. PRESTIGE LINCOLN			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2017		
Mailing Address 3333 N MAIN ST			FEC Identification Number C		
City GAINSEVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.19753		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. GOTOMYPC.COM			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2017		
Mailing Address 7414 HOLLISTER AVE			FEC Identification Number C		
City GOLETA	State CA	Zip Code 93117	Amount of Each Disbursement this Period 203.00		
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.19755		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	5108.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2017	
Mailing Address PO BOX 619616			FEC Identification Number C	
City DFW AIRPORT	State TX	Zip Code 75261	Amount of Each Disbursement this Period 1772.50	
Purpose of Disbursement AIRFARE		Category/Type 001	Transaction ID : SB17.19756	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2017	
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C	
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 485.89	
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type 001	Transaction ID : SB17.19795	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. STARTLOGIC.COM			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2017	
Mailing Address 919 E JEFFERSON ST			FEC Identification Number C	
City PHOENIX	State AZ	Zip Code 85034	Amount of Each Disbursement this Period 248.36	
Purpose of Disbursement WEB HOSTING		Category/Type 001	Transaction ID : SB17.19798	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	485.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017
Mailing Address POST OFFICE BOX 360001		FEC Identification Number C
City FT. LAUDERDALE	State FL	Zip Code 33336
Purpose of Disbursement SEE MEMO ENTRIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 515.10
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017
Mailing Address 300 FIRST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 446.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. UBER CAB		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017
Mailing Address 182 HOWARD ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 30.42
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:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	515.10
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 12 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2017		
Mailing Address POST OFFICE BOX 360001			FEC Identification Number C		
City FT. LAUDERDALE	State FL	Zip Code 33336	Amount of Each Disbursement this Period 703.30		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.19842		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2017		
Mailing Address 300 FIRST STREET SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 703.30		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.19843		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. AUTO-OWNERS INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2017		
Mailing Address PO BOX 30315			FEC Identification Number C		
City LANSING	State MI	Zip Code 48909	Amount of Each Disbursement this Period 114.95		
Purpose of Disbursement CAMPAIGN VEHICLE INSURANCE		Category/ Type 001	Transaction ID : SB17.19785		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	818.25
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 13 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address POST OFFICE BOX 15153			FEC Identification Number C	
City WILMINGTON	State DE	Zip Code 19886	Amount of Each Disbursement this Period 8823.49	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.19757	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. GOOGLE, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address ONLINE			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94035	Amount of Each Disbursement this Period 1350.00	
Purpose of Disbursement ADVERTISING		Category/ Type 001	Transaction ID : SB17.19759	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. VISTAPRINT			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address 95 HAYDEN AVENUE			FEC Identification Number C	
City LEXINGTON	State MA	Zip Code 02421	Amount of Each Disbursement this Period 267.99	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : SB17.19760	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	8823.49
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 14 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017
Mailing Address 156 UNIVERSITY AVE		FEC Identification Number C
City PALO ALTO	State CA	Zip Code 94301
Purpose of Disbursement ADVERTISING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 602.39
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITED STATES POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017
Mailing Address 4600 SOUTHWEST 34TH STREET		FEC Identification Number C
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement POSTAGE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 403.48
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017
Mailing Address POST OFFICE BOX 20980 DEPT. 980		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30320
Purpose of Disbursement AIRFARE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 345.60
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:	<input checked="" type="checkbox"/> Memo Item	

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

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOBBY VANS STEAKHOUSE			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address 25 BROAD ST			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10004	Amount of Each Disbursement this Period 688.60	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.19775	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PRESTIGE LINCOLN			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address 3333 N MAIN ST			FEC Identification Number C	
City GAINSEVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 1930.47	
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.19778	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. TIEGEN, JOHN, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017	
Mailing Address PO BOX 725			FEC Identification Number C	
City FOUNTAIN	State CO	Zip Code 80817	Amount of Each Disbursement this Period 1751.00	
Purpose of Disbursement EVENT SPEAKER		Category/ Type 001	Transaction ID : SB17.19877	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 16 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAMPAIGN & ELECTIONS MAGAZINE		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2017
Mailing Address 1901 NORTH MAIN STREET SUITE 1105		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement ADVERTISING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 417.00	
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) ▼	Transaction ID : SB17.19879
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CHASE CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017
Mailing Address POST OFFICE BOX 15153		FEC Identification Number C
City WILMINGTON	State DE	Zip Code 19886
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 6215.91	
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) ▼	Transaction ID : SB17.19801
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GOOGLE, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017
Mailing Address ONLINE		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94035
Purpose of Disbursement ADVERTISING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 945.11	
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) ▼	Transaction ID : SB17.19802
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6215.91
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 17 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE PRINT SHOP OF CHIEFLAND			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address POST OFFICE BOX 606			FEC Identification Number C	
City CHIEFLAND	State FL	Zip Code 32644	Amount of Each Disbursement this Period 601.34	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : SB17.19803	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. UPS STORE			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 5745 SOUTHWEST 75TH STREET			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 530.21	
Purpose of Disbursement SHIPPING		Category/ Type 001	Transaction ID : SB17.19805	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. EXXON/MOBIL			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 3424 SOUTHWEST WILLISTON ROAD			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 89.76	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : SB17.19806	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	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 18 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PUBLIX SUPERMARKETS, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017
Mailing Address 5801 SOUTHWEST 75TH STREET		FEC Identification Number C
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement OFFICE SUPPLIES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 266.85
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PUTNAM COUNTY CHAMBER		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017
Mailing Address 305 N MADISON AVE		FEC Identification Number C
City EATONTON	State GA	Zip Code 31024
Purpose of Disbursement MEMBERSHIP DUES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 280.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. JET BLUE AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017
Mailing Address 2701 QUEENS PLAZA N #6		FEC Identification Number C
City LONG ISLAND	State NY	Zip Code 11101
Purpose of Disbursement AIRFARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 265.20
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:	<input checked="" type="checkbox"/> Memo Item	

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

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GAINESVILLE CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 300 E. UNIVERSITY AVE SUITE 100			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32601	Amount of Each Disbursement this Period 325.00	
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type 001	Transaction ID : SB17.19812	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CONGRESSIONAL INSTITUTE			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 401 WYTHE ST #103			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 1540.00	
Purpose of Disbursement CONFERENCE REGISTRATION		Category/ Type 001	Transaction ID : SB17.19814	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HARRIS TEETER			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address PO BOX 10100			FEC Identification Number C	
City MATTHEWS	State NC	Zip Code 28106	Amount of Each Disbursement this Period 330.35	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : SB17.19818	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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).....▶	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 20 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PORK BARREL BBQ			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 2312 MT. VERNON AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22301	Amount of Each Disbursement this Period 468.50	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.19821	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017	
Mailing Address POST OFFICE BOX 15153			FEC Identification Number C	
City WILMINGTON	State DE	Zip Code 19886	Amount of Each Disbursement this Period 1454.39	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : SB17.19844	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CAPITOL HILL SUITES			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017	
Mailing Address 200 C STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 625.17	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : SB17.19847	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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).....▶	1454.39
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 21 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017		
Mailing Address POST OFFICE BOX 105378			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30348	Amount of Each Disbursement this Period 81.84		
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.19850		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. UPS STORE			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017		
Mailing Address 5745 SOUTHWEST 75TH STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 254.40		
Purpose of Disbursement SHIPPING		Category/ Type 001	Transaction ID : SB17.19851		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017		
Mailing Address 1601 TRAPELO RD			FEC Identification Number C		
City WALTHAM	State MA	Zip Code 02451	Amount of Each Disbursement this Period 60.00		
Purpose of Disbursement E-MARKETING		Category/ Type 001	Transaction ID : SB17.19854		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	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 22 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEK			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2017	
Mailing Address PO BOX 23715			FEC Identification Number C	
City CHAGRIN FALLS	State OH	Zip Code 44023	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.19874	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. GRIT STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2017	
Mailing Address 12391 NE 91ST CT			FEC Identification Number C	
City ARCHER	State FL	Zip Code 32618	Amount of Each Disbursement this Period 3300.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : SB17.19751	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2017	
Mailing Address 2201 N MAIN ST			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 592.79	
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.19790	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	4892.79
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2017	
Mailing Address 2201 N MAIN ST			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 595.59	
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.19825	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PARKS FORD			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2017	
Mailing Address 2201 N MAIN ST			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Disbursement this Period 595.59	
Purpose of Disbursement CAMPAIGN VEHICLE LEASE		Category/ Type 001	Transaction ID : SB17.19863	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 2006.98	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.19750	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	3198.16
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 24 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 1500.93	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.19794	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2017	
Mailing Address 824 S. MILLEDGE AVE STE 101			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30605	Amount of Each Disbursement this Period 1644.78	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : SB17.19841	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. SUNTRUST BANK			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2017	
Mailing Address 5303 SOUTHWEST 91ST DRIVE			FEC Identification Number C	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : SB17.19793	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	3195.71
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 25 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUNTRUST BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2017
Mailing Address 5303 SOUTHWEST 91ST DRIVE		FEC Identification Number C
City GAINESVILLE	State FL	Zip Code 32608
Purpose of Disbursement BANK FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 50.00
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2017
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL EXPENSES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 110.22
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SUREPAYROLL, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2017
Mailing Address 2350 RAVINE WAY SUITE 100		FEC Identification Number C
City GLENVIEW	State IL	Zip Code 60025
Purpose of Disbursement PAYROLL (SEE MEMO)	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1320.00
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:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1480.22
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 26 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2017		
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C		
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 1320.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.19873		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement PAYROLL (SEE MEMO)		Category/ Type 001	Transaction ID : SB17.19877		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2017		
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C		
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.19872		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	320.00
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 27 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 26.72		
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.19789		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 280.00		
Purpose of Disbursement PAYROLL (SEE MEMO)		Category/ Type 001	Transaction ID : SB17.19799		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2017		
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C		
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 280.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.19871		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	306.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 23.38		
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.19800		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017		
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C		
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 180.00		
Purpose of Disbursement PAYROLL (SEE MEMO)		Category/ Type 001	Transaction ID : SB17.19831		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017		
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C		
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 180.00		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.19870		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	203.38
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 29 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 15.03	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.19832	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 480.00	
Purpose of Disbursement PAYROLL (SEE MEMO)		Category/ Type 001	Transaction ID : SB17.19867	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. JACKSON, LAURA, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2017	
Mailing Address 6470 SOUTHEAST 60TH AVENUE			FEC Identification Number C	
City TRENTON	State FL	Zip Code 32693	Amount of Each Disbursement this Period 480.00	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : SB17.19869	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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).....▶	495.03
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUREPAYROLL, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2017	
Mailing Address 2350 RAVINE WAY SUITE 100			FEC Identification Number C	
City GLENVIEW	State IL	Zip Code 60025	Amount of Each Disbursement this Period 40.08	
Purpose of Disbursement PAYROLL EXPENSES		Category/ Type 001	Transaction ID : SB17.19868	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. THE CONGRESSIONAL CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2017	
Mailing Address 2001 NEW HAMPSHIRE AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20009	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.19864	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. THE CONGRESSIONAL CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2017	
Mailing Address 2001 NEW HAMPSHIRE AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20009	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement EVENT TICKETS		Category/ Type 001	Transaction ID : SB17.19876	
Candidate Name			<input type="checkbox"/> Memo Item	
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).....▶	940.08
TOTAL This Period (last page this line number only).....▶	38454.05

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

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

NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAST FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2017		
Mailing Address PO BOX 3016			FEC Identification Number C C00632257		
City STUART	State FL	Zip Code 34995	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.19866		
Candidate Name MAST, BRIAN, , ,		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: FL District: 18					

Full Name (Last, First, Middle Initial) B. MAST FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2017		
Mailing Address PO BOX 3016			FEC Identification Number C C00632257		
City STUART	State FL	Zip Code 34995	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type 011	Transaction ID : SB21.19878		
Candidate Name MAST, BRIAN, , ,		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: FL District: 18					

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

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