

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Team McHenry

ADDRESS (number and street) 228 S. Washington St., Ste. 115 .

Check if different than previously reported. (ACC)

Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00544650

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

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)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

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

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

01 / 01 / 2018 through 03 / 31 / 2018

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

04 / 15 / 2018

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 3X (Rev. 05/2016)

Write or Type Committee Name

**Team McHenry**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="14142.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="14142.93"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="254700.00"/>	<input type="text" value="254700.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="268842.93"/>	<input type="text" value="268842.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="225146.29"/>	<input type="text" value="225146.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43696.64"/>	<input type="text" value="43696.64"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**Team McHenry**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	168950.00	168950.00
(ii) Unitemized .....	250.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	169200.00	169200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	85500.00	85500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	254700.00	254700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	254700.00	254700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	254700.00	254700.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	41274.74	41274.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	41274.74	41274.74
22. Transfers to Affiliated/Other Party Committees.....	183871.55	183871.55
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	225146.29	225146.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	225146.29	225146.29

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	254700.00	254700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	254700.00	254700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	41274.74	41274.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	41274.74	41274.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
**Team McHenry**

**A. BARR, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 HUEHL ROAD  
 BLD #3  
 City NORTHBROOK State IL Zip Code 60062-2319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICASH LOANS Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 26 / 2018  
**Transaction ID : SA11A.20460**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**B. BERWANGER, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 HUDSON STREET  
 City HOBOKEN State NJ Zip Code 07030-5590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHOUSE FINANCIAL Occupation (for Individual) FINANCIAL SERVICES MANAGEMEN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2018  
**Transaction ID : SA11A.20528**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**C. BLANKENSHIP, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 723 KANAWHA BOULEVARD EAST, CHARLE  
 City CHARLESTON State WV Zip Code 25301-2707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PUBLIC RELATIONS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2018  
**Transaction ID : SA11A.20494**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. CARD, BRAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1016 D STREET NORTHEAST  
 City WASHINGTON State DC Zip Code 20002-6130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARD & ASSOCIATES Occupation (for Individual) GR-LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 16 / 2018**  
**Transaction ID : SA11A.20689**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 CONTRIBUTION

**B. CARLSON, BUCKLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4950 HILLBROOK LANE NW  
 City WASHINGTON State DC Zip Code 20016-3208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) WRITER/PUBLIC AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 08 / 2018**  
**Transaction ID : SA11A.20501**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**C. CARLSON, PETER, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 HARRIS RD.  
 City CHARLOTTE State NC Zip Code 28211-2149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHTHOUSE FINANCIAL Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **03 / 05 / 2018**  
**Transaction ID : SA11A.20479**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. CASEY, MARK, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 139 ALBION AVE

City WOODSIDE	State CA	Zip Code 94062-3601
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPITAL GROUP	Occupation (for Individual) FINANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2018

**Transaction ID : SA11A.20690**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION

**B. CLIFFORD, KEVIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 333 S. HOPE ST., 53RD FLOOR

City LOS ANGELES	State CA	Zip Code 90071-1418
---------------------	-------------	------------------------

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

Name of Employer (for Individual) CAPITAL GROUP	Occupation (for Individual) FINANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2018

**Transaction ID : SA11A.20687**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION

**C. CODURI, RICHARD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 220 NORTH MARKET STREET

City STAUNTON	State VA	Zip Code 24401-3629
------------------	-------------	------------------------

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

Name of Employer (for Individual) TRIREME COMMUNICATIONS	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2018

**Transaction ID : SA11A.20500**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11800.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. COLEMAN, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 DEERFIELD LANE  
 City OSSINING State NY Zip Code 10562-2529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RITECHECK Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 14 / 2018  
**Transaction ID : SA11A.20468**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. COMBS, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 CONTRALTO COURT  
 City VIENNA State VA Zip Code 22182-3318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) PUBLIC AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 02 / 05 / 2018  
**Transaction ID : SA11A.20493**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item CONTRIBUTION

**C. CRADDOCK, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 12TH STREET NE  
 City WASHINGTON State DC Zip Code 20002-6310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVENPORT VENTURES Occupation (for Individual) GOVERNMENT RELATIONS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 12 / 2018  
**Transaction ID : SA11A.20514**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 6400.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 10 OF 45  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. CRISP, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5310 CURLYBARK PLACE  
 City BRENTWOOD State TN Zip Code 37027-5183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CRISP COMMUNICATIONS Occupation (for Individual) PR PROFESSIONAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 06 / 2018**  
**Transaction ID : SA11A.20495**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

**B. CUTLER, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 ESSEX MANOR CT  
 City ALEXANDRIA State VA Zip Code 22308-1000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COCOON, INC. Occupation (for Individual) GOVERNMENT RELATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 08 / 2018**  
**Transaction ID : SA11A.20502**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**C. DALCOL, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2526B SOUTH ARLINGTON MILL DRIVE,  
 City ARLINGTON State VA Zip Code 22206-4035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POTOMAC COMMUNICATIONS STRATEGIES Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : SA11A.20486**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DAVENPORT, DOUGLAS, , ,**

Mailing Address **3721 NORTH VERMONT STREET**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22207-4539</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>SELF</b>	Occupation (for Individual) <b>PUBLIC AFFAIRS</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2700.00**

Date of Receipt  
**02 / 09 / 2018**

**Transaction ID : SA11A.20503**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DAVENPORT, JAMES, , ,**

Mailing Address **5114 ENGLEFIELD WAY**

City <b>CHARLOTTE</b>	State <b>NC</b>	Zip Code <b>28226-3553</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>BRIGHTHOUSE FINANCIAL</b>	Occupation (for Individual) <b>ATTORNEY</b>
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**03 / 05 / 2018**

**Transaction ID : SA11A.20521**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DOWD, RODDEY, , , JR.**

Mailing Address **PO BOX 35430**

City <b>CHARLOTTE</b>	State <b>NC</b>	Zip Code <b>28235-5430</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>CHARLOTTE PIPE &amp; FOUNDRY</b>	Occupation (for Individual) <b>CEO</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**03 / 05 / 2018**

**Transaction ID : SA11A.20478**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. ENGLISH, THOMAS, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 27 HEDGE BROOK LANE

City STAMFORD	State CT	Zip Code 06903-2029
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NEW YORK LIFE INSURANCE COMPANY		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>1000.00</b>

Date of Receipt  
**03 / 05 / 2018**  
**Transaction ID : SA11A.20524**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B. FERNANDEZ, JOSE, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 17 KATHY LANE

City WARREN	State NJ	Zip Code 07059-5335
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>

Date of Receipt  
**02 / 12 / 2018**  
**Transaction ID : SA11A.20462**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**C. GARDNER, AARON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1101 NEW HAMPSHIRE AVE. NW APT. #9

City WASHINGTON	State DC	Zip Code 20037-1508
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) DCI		Occupation (for Individual) CONSULTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>250.00</b>

Date of Receipt  
**01 / 23 / 2018**  
**Transaction ID : SA11A.20480**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. GENTZEL, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2508 SOUTH WALTER REED DRIVE  
 City ARLINGTON State VA Zip Code 22206-4094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) PUBLIC AFFAIRS PROFESSIONAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 12 / 2018  
**Transaction ID : SA11A.20512**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. GRILLO, RYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 11TH STREET, NE  
 City WASHINGTON State DC Zip Code 20002-5317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 02 / 09 / 2018  
**Transaction ID : SA11A.20505**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item CONTRIBUTION

**C. GURR, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4414 230TH WAY SE  
 City SAMMAMISH State WA Zip Code 98075-5239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWEST COMMUNICATIONS INC. Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 06 / 2018  
**Transaction ID : SA11A.20498**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HARDY, PHIL, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2018
Mailing Address 425 MASSACHUSETTS AVE NW		<b>Transaction ID : SA11A.20509</b>
City WASHINGTON	State DC	Zip Code 20001-2609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) STRATEGIES 360	Occupation (for Individual) SENIOR VP   FEDERAL RELATIONS	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HAUN, CAROLINE, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 24 / 2018
Mailing Address 4450 S PARK AVE, APT 301		<b>Transaction ID : SA11A.20485</b>
City CHEVY CHASE	State MD	Zip Code 20815-3648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) DCI GROUP	Occupation (for Individual) MANAGING DIRECTOR	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HAYWARD, DAN, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2018
Mailing Address 107 KOCH LANE		<b>Transaction ID : SA11A.20491</b>
City HARRISBURG	State PA	Zip Code 17112-3393
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NOVAK STRATEGIC	Occupation (for Individual) MANAGING PARTNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. HIPP, VAN, D., , JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 809 N QUAKER LANE

City ALEXANDRIA	State VA	Zip Code 22302-3416
--------------------	-------------	------------------------

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

Name of Employer (for Individual) AMERICAN DEFENSE INTERNATIONAL	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2018

**Transaction ID : SA11A.20473**

Amount of Each Receipt this Period  
10000.00

Memo Item  
CONTRIBUTION

**B. HOBART, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3718 CENTRAL AVE

City NASHVILLE	State TN	Zip Code 37205-2434
-------------------	-------------	------------------------

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

Name of Employer (for Individual) HHQ VENTURES	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2018

**Transaction ID : SA11A.20692**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. HODGES, MICHAEL, L., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 921 KIRKWOOD AVE.

City NASHVILLE	State TN	Zip Code 37204-2648
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADVANCE FINANCIAL	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2018

**Transaction ID : SA11A.20469**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. HYDE, TIMOTHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9062 TOWER HOUSE PL  
 City ALEXANDRIA State VA Zip Code 22308-2758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP, LLC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 12 / 2018  
**Transaction ID : SA11A.20508**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. KEMP, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6204 WELBORN DRIVE  
 City BETHESDA State MD Zip Code 20816-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 06 / 2018  
**Transaction ID : SA11A.20499**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. KIM, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 EAST 22ND ST  
 City NEW YORK State NY Zip Code 10010-5304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 03 / 05 / 2018  
**Transaction ID : SA11A.20525**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. LAMBERT, MYLES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 10 RUNYON ROAD

City MIDDLETOWN	State NJ	Zip Code 07748-3508
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BRIGHOUSE FINANCIAL	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

**Transaction ID : SA11A.20526**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. LENARDSON, ROY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7962 GUADIANA WAY

City AVE MARIA	State FL	Zip Code 34142-9596
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PUBLIC AFFAIRS
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2018

**Transaction ID : SA11A.20496**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. LENZ, SCOTT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 41 BELLEVUE AVENUE

City SUMMIT	State NJ	Zip Code 07901-2007
----------------	-------------	------------------------

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

Name of Employer (for Individual) NEW YORK LIFE INSURANCE COMPANY	Occupation (for Individual) SVP & CHIEF TAX COUNSEL
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2018

**Transaction ID : SA11A.20529**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. LIEBERMAN, MARTIN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1352 WESSLING DR.  
 City NORTHBROOK State IL Zip Code 60062-4229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 14 / 2018  
**Transaction ID : SA11A.20472**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. LOPER, BRETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4551 32ND ROAD N  
 City ARLINGTON State VA Zip Code 22207-4466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICAN EXPRESS Occupation (for Individual) SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 02 / 2018  
**Transaction ID : SA11A.20492**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. MACKECHNIE, IAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1902 ANDROS DRIVE  
 City TAMPA State FL Zip Code 33629-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMSCOT FINANCIAL Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 14 / 2018  
**Transaction ID : SA11A.20471**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. MATHAS, THEODORE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 CARRIAGE TRL  
 City TARRYTOWN State NY Zip Code 10591-6306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 05 / 2018**  
**Transaction ID : SA11A.20522**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. MCCABE, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 COLLINS BROOK RD.  
 City MEREDITH State NH Zip Code 03253-4703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP, LLC Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10800.00

Date of Receipt **02 / 12 / 2018**  
**Transaction ID : SA11A.20515**  
 Amount of Each Receipt this Period 10800.00  
 Memo Item CONTRIBUTION

**C. MCLAUGHLIN, RYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 N. CLINTON, #602  
 City CHICAGO State IL Zip Code 60654-8884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAC STRATEGIES GROUP Occupation (for Individual) PRESIDENT/CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : SA11A.20487**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 14300.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. MORGAN, JANET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10706 OLD WAYSIDE ROAD  
 City CHARLOTTE State NC Zip Code 28277-1404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHOUSE FINANCIAL Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : SA11A.20520**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. MURPHY, CONOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 MONTEREY AVENUE  
 City VILLAGE OF PELHAM State NY Zip Code 10803-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHOUSE FINANCIAL Occupation (for Individual) CHIEF PRODUCT AND STRATEGIC C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **03 / 08 / 2018**  
**Transaction ID : SA11A.20527**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

**C. MYERS, RENEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 929 N. LARRIMORE ST.  
 City ARLINGTON State VA Zip Code 22205-1410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **01 / 23 / 2018**  
**Transaction ID : SA11A.20481**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 21 OF 45  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. NICHOLS, GEORGE, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10010 GARY RD  
 City POTOMAC State MD Zip Code 20854-4149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW YORK LIFE INSURANCE CO. Occupation (for Individual) INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **03 / 05 / 2018**  
**Transaction ID : SA11A.20523**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

**B. O' BRIEN, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5301 MARLYN DRIVE  
 City BETHESDA State MD Zip Code 20816-1934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **01 / 24 / 2018**  
**Transaction ID : SA11A.20482**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

**C. PATRU, EDWIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22990 HOMESTEAD LANDING COURT  
 City ASHBURN State VA Zip Code 20148-1772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP LLC Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 13 / 2018**  
**Transaction ID : SA11A.20518**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. QUAYLE, BENJAMIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4026 E SAINT JOSEPH WAY  
 City PHOENIX State AZ Zip Code 85018-1102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HHQ VENTURES, LLC Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : SA11A.20507**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. REICHE, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3333 WISCONSIN AVE NW APT 201  
 City WASHINGTON State DC Zip Code 20016-3872  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **01 / 24 / 2018**  
**Transaction ID : SA11A.20484**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item CONTRIBUTION

**C. RING, JUDITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 806 GAVERNIE CT  
 City CRESTVIEW State FL Zip Code 32539-8303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SPEEDEE CASH MANAGEMENT Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 14 / 2018**  
**Transaction ID : SA11A.20470**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4200.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROBERTSON, JENNIFER, , ,**

Mailing Address 12109 LAS FLORES DR.

City AUSTIN	State TX	Zip Code 78732-1939
----------------	-------------	------------------------

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

Name of Employer (for Individual) PACIFIC RIM CORP	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2018

**Transaction ID : SA11A.20476**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RODRIGUEZ, KATHERINE, , ,**

Mailing Address 2655 41ST STREET NW #B1

City WASHINGTON	State DC	Zip Code 20007-1276
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DCI GROUP	Occupation (for Individual) DIRECTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2018

**Transaction ID : SA11A.20483**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ROSENTHAL, JOHN, , ,**

Mailing Address 210 WOODS END DRIVE

City BERNARDS	State NJ	Zip Code 07920-2132
------------------	-------------	------------------------

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

Name of Employer (for Individual) BRIGHOUSE FINANCIAL	Occupation (for Individual) CIO
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2018

**Transaction ID : SA11A.20693**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 24 OF 45  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Team McHenry**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROSS, STEPHEN, M., ,**

Mailing Address **25 COLUMBUS CIRCLE PH 80**

City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10019-1107</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation (for Individual) <b>CHAIRMAN</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**02 / 21 / 2018**

**Transaction ID : SA11A.20474**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RYAN, PAUL, , ,**

Mailing Address **2804 N HARRISON ST.**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22207-1558</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>DCI GROUP</b>	Occupation (for Individual) <b>PUBLIC AFFAIRS</b>
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**02 / 09 / 2018**

**Transaction ID : SA11A.20506**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SMET, JOHN, , ,**

Mailing Address **2810 TENNYSON PLACE**

City <b>HERMOSA BEACH</b>	State <b>CA</b>	Zip Code <b>90254-2258</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>CAPITAL GROUP</b>	Occupation (for Individual) <b>FINANCE</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**2700.00**

Date of Receipt  
**03 / 22 / 2018**

**Transaction ID : SA11A.20688**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. SNYDER, TERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1551 LARIMER #1603  
 City DENVER State CO Zip Code 80202-1633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 13 / 2018**  
**Transaction ID : SA11A.20519**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

**B. STEIN, SHIMON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2122 MASSACHUSETTS AVE, NW, APT. 6 APT. 614  
 City WASHINGTON State DC Zip Code 20008-2830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEST FRONT STRATEGIES, LLC Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 30 / 2018**  
**Transaction ID : SA11A.20489**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. STEVENS, CRAIG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 DUNNINGTON WAY  
 City BEDFORD State NH Zip Code 03110-6142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 12 / 2018**  
**Transaction ID : SA11A.20513**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5800.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 26 OF 45  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. TILLEY, CORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3549 ESPLANADE WAY  
 City TALLAHASSEE State FL Zip Code 32311-7897  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COREMESSAGE Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 06 / 2018  
**Transaction ID : SA11A.20497**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. TONER, JUSTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 9TH ST  
 City MANHATTAN BEACH State CA Zip Code 90266-5509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 03 / 14 / 2018  
**Transaction ID : SA11A.20691**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item CONTRIBUTION

**C. WARREN, MIRIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1724 6TH ST NW  
 City WASHINGTON State DC Zip Code 20001-5103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2018  
**Transaction ID : SA11A.20490**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. WEST, CHRISTOPHER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 121 COUNTRY CLUB CIRCLE  
City WINCHESTER State VA Zip Code 22602-6001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 26 / 2018  
**Transaction ID : SA11A.20488**  
Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. WOLF, OLIVER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1605 16TH STREET, NW #4  
City WASHINGTON State DC Zip Code 20009-3006  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) DCI GROUP Occupation (for Individual) PUBLIC AFFAIRS CONSULTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 09 / 2018  
**Transaction ID : SA11A.20504**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. EASTERN BAND OF CHEROKEE INDIANS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 455  
City CHEROKEE State NC Zip Code 28719-0455  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 44300.00

Date of Receipt 02 / 13 / 2018  
**Transaction ID : SA11A.20463**  
Amount of Each Receipt this Period 44300.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45550.00
<b>TOTAL</b> This Period (last page this line number only).....	168950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. ACCOCIATION FOR ACCESSIBLE MEDICINES PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 NEW JERSEY AVE NW  
SUITE 850

City WASHINGTON State DC Zip Code 20001-3051

FEC ID number of contributing federal political committee. **C** C00383463

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 20 / 2018

**Transaction ID : SA11C.20678**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. ACE CASH EXPRESS INC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1231 GREENWAY DRIVE SUITE 600

City IRVING State TX Zip Code 75038-2511

FEC ID number of contributing federal political committee. **C** C00392290

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 14 / 2018

**Transaction ID : SA11C.20464**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. ADVANCE AMERICA CASH ADVANCE CENTERS INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 N. CHURCH STREET

City SPARTANBURG State SC Zip Code 29306-5138

FEC ID number of contributing federal political committee. **C** C00429001

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 01 / 26 / 2018

**Transaction ID : SA11C.20458**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 18TH STREET, NW  
SUITE 300

City WASHINGTON State DC Zip Code 20006-5531

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2018

**Transaction ID : SA11C.20455**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ARGENTUM'S SILVER PAC**

Mailing Address 1650 KING STREET  
SUITE 602

City ALEXANDRIA State VA Zip Code 22314-2747

FEC ID number of contributing federal political committee. **C** C00338020

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2018

**Transaction ID : SA11C.20461**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BRANCH BANKING & TRUST COMPANY PAC**

Mailing Address P.O. BOX 1290  
C/O ACCT AND FINANCIAL REPORTING

City WINSTON SALEM State NC Zip Code 27102-1290

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2018

**Transaction ID : SA11C.20681**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. CAPG FEDERAL GROUP-AMERICA'S PHYSICIANS GROUP PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 915 WILSHIRE BLVD SUITE 1620

City LOS ANGELES	State CA	Zip Code 90017-2658
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00461756

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2018  
**Transaction ID : SA11C.20679**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. CHECKSMART FINANCIAL LLC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7001 POST ROAD

City DUBLIN	State OH	Zip Code 43016-8309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00433805

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 26 / 2018  
**Transaction ID : SA11C.20457**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 316 PENNSYLVANIA AVE SE  
SUITE 401

City WASHINGTON	State DC	Zip Code 20003-1172
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2018  
**Transaction ID : SA11C.20684**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. DOMINION RESOURCES, INC. PAC - DOMINION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address ONE JAMES RIVER PLAZA 20TH FLOOR O BOX P  
 City RICHMOND State VA Zip Code 23261-  
 FEC ID number of contributing federal political committee. **C** C00108209  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 12 / 2018**  
**Transaction ID : SA11C.20674**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. FC COMPASSUS LLC PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 CADILLAC DRIVE SUITE 400  
 City BRENTWOOD State TN Zip Code 37027-1001  
 FEC ID number of contributing federal political committee. **C** C00581728  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 31 / 2018**  
**Transaction ID : SA11C.20686**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. FINANCIAL SERVICE CENTERS OF AMERICA, INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address COURT PLAZA NO. 21 MAIN ST, P.O. BOX 647  
 City HACKENSACK State NJ Zip Code 07602-0647  
 FEC ID number of contributing federal political committee. **C** C00232843  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 14 / 2018**  
**Transaction ID : SA11C.20465**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. GENENTECH INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 DNA WAY

City SO. SAN FRANCISCO	State CA	Zip Code 94080-4918
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00199257

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2018

**Transaction ID : SA11C.20685**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

TO BE CHARGED BACK

**B. HOLLAND & KNIGHT CMTE FOR EFFECTIVE GOV.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2099 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20006-6800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2018

**Transaction ID : SA11C.20477**

Amount of Each Receipt this Period  
750.00

Memo Item  
CONTRIBUTION

IN KIND-FUNDRAISING SERVICES

**C. INTERDIGITAL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 BELLEVUE PARKWAY  
SUITE 300

City WILMINGTON	State DE	Zip Code 19809-3727
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00400333

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2018

**Transaction ID : SA11C.20475**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1166 AVENUE OF THE AMERICAS  
 City NEW YORK State NY Zip Code 10036-2708  
 FEC ID number of contributing federal political committee. **C** C00457234  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 13 / 2018**  
**Transaction ID : SA11C.20676**  
 Amount of Each Receipt this Period 750.00  
 Memo Item  
**CONTRIBUTION**  
 IN KIND - FUNDRAISING CONSULTING

**B. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1295 STATE ST  
 City SPRINGFIELD State MA Zip Code 01111-0001  
 FEC ID number of contributing federal political committee. **C** C00118943  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : SA11C.20459**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. MYLAN INC. PAC (MYPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 6TH ST NW STE 525  
 City WASHINGTON State DC Zip Code 20001-5537  
 FEC ID number of contributing federal political committee. **C** C00332395  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 26 / 2018**  
**Transaction ID : SA11C.20680**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. NATIONAL ASSOCIATION OF BROADCASTERS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1771 N STREET NW

City WASHINGTON	State DC	Zip Code 20036-2800
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2018

**Transaction ID : SA11C.20467**

Amount of Each Receipt this Period  
15000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 2995

City CORDOVA	State TN	Zip Code 38088-2995
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2018

**Transaction ID : SA11C.20683**

Amount of Each Receipt this Period  
6000.00

Memo Item  
CONTRIBUTION

**C. PLAINS COTTON GROWERS INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4517 W LOOP 289

City LUBBOCK	State TX	Zip Code 79414-1235
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00599084

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

**Transaction ID : SA11C.20677**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMIT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 SOUTH WACKER DRIVE  
 36TH FLOOR  
 City CHICAGO State IL Zip Code 60606-4603  
 FEC ID number of contributing federal political committee. **C** C00450189  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 14 / 2018**  
**Transaction ID : SA11C.20466**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8700 WEST BRYN MAWR  
 SUITE 1200S  
 City CHICAGO State IL Zip Code 60631-3512  
 FEC ID number of contributing federal political committee. **C** C00066472  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : SA11C.20456**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2485  
 City SPRINGFIELD State VA Zip Code 22152-0485  
 FEC ID number of contributing federal political committee. **C** C00467431  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 12 / 2018**  
**Transaction ID : SA11C.20675**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **8500.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. THERMO FISHER SCIENTIFIC INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 THIRD AVE.

City WALTHAM	State MA	Zip Code 02451-7551
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00292318

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2018

**Transaction ID : SA11C.20682**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	85500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 450 LAUREL STREET  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70801-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2018			

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I1130f**

Amount of Each Disbursement this Period

[REDACTED] 3782.14

Memo Item

Full Name (Last, First, Middle Initial)

**B. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City  
SAN FRANCISCO

State  
CA

Zip Code  
94128

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			02			2018			

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I1130f**

Amount of Each Disbursement this Period

[REDACTED] 24.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City  
SAN FRANCISCO

State  
CA

Zip Code  
94128

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
02			02			2018			

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I1131**

Amount of Each Disbursement this Period

[REDACTED] 24.95

Memo Item

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

[REDACTED] 3832.04

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. AUTHORIZE.NET**

Mailing Address P.O. BOX 8999

City  
SAN FRANCISCO

State  
CA

Zip Code  
94128

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			02			2018			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I1131'

Amount of Each Disbursement this Period

[ ] 24.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 1909 K ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			16			2018			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I11312

Amount of Each Disbursement this Period

[ ] 51.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 1909 K ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
02			15			2018			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I1131

Amount of Each Disbursement this Period

[ ] 51.90

Memo Item

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

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

[ ] 128.75

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 1909 K ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1131  
Amount of Each Disbursement this Period  
51.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. BON VIVANT CATERING**

Mailing Address 6330 DUNMAN WAY

City  
ALEXANDRIA

State  
VA

Zip Code  
22315-5505

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I11315  
Amount of Each Disbursement this Period  
1518.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. C.W. FRANKLIN LLC**

Mailing Address 107 S WEST ST.  
STE. 410

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-2824

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1131  
Amount of Each Disbursement this Period  
3000.00

Memo Item

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

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

4569.90

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD. #400

City VIENNA State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1131

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD. #400

City VIENNA State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1131

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD. #400

City VIENNA State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1131

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. DC TASTE**

Mailing Address 1600 FITZGERALD LANE

City  
ALEXANDRIA

State  
VA

Zip Code  
22302

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1132I**

Amount of Each Disbursement this Period

2309.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. HUCKABY DAVIS LISKER**

Mailing Address 228 S WASHINGTON STREET STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1132I**

Amount of Each Disbursement this Period

769.06

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 3180 18TH STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94110

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1132I**

Amount of Each Disbursement this Period

80.30

Memo Item

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

3158.84

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. THE OORBEEK GROUP**

Mailing Address 5614 GARNETTS FARMS DRIVE

City  
HAYMARKET

State  
VA

Zip Code  
20169

Purpose of Disbursement  
CATERING/PRINTING/TRAVEL/POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1132I

Amount of Each Disbursement this Period

[REDACTED] 20048.45

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE OORBEEK GROUP**

Mailing Address 5614 GARNETTS FARMS DRIVE

City  
HAYMARKET

State  
VA

Zip Code  
20169

Purpose of Disbursement  
CATERING/PRINTING/POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1132I

Amount of Each Disbursement this Period

[REDACTED] 7286.76

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOLLAND & KNIGHT CMTE FOR EFFECTIVE GOV.**

Mailing Address 2099 PENNSYLVANIA AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20006-6800

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	8

FEC Identification Number

C C00171330

Transaction ID : SB21B.2047I

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item IN KIND-FUNDRAISING SERVICES

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

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

[REDACTED] 28085.21

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)**

Full Name (Last, First, Middle Initial)

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036-2708

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2018

FEC Identification Number: C00457234

Transaction ID : SB21B.20676

Amount of Each Disbursement this Period: 750.00

FUNDRAISING CONSULTING

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	41274.74

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Team McHenry**

**A. MCHENRY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
MCHENRY FOR CONGRESS

Mailing Address P.O. BOX 1406

City HICKORY State NC Zip Code 28603

Purpose of Disbursement  
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name  
MCHENRY, PATRICK , TIMOTHY, ,

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

State: NC District: 10

Date of Disbursement: 03 / 31 / 2018

FEC Identification Number: C C00393629  
Transaction ID : SB22.I11322  
Amount of Each Disbursement this Period: 138831.39

Memo Item

**B. MORE CONSERVATIVES PAC (MCPAC)**

Full Name (Last, First, Middle Initial)  
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

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

State: District:

Date of Disbursement: 03 / 31 / 2018

FEC Identification Number: C C00540187  
Transaction ID : SB22.I11323  
Amount of Each Disbursement this Period: 15940.16

Memo Item

**C. NRCC**

Full Name (Last, First, Middle Initial)  
NRCC

Mailing Address 320 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement  
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

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

State: District:

Date of Disbursement: 03 / 31 / 2018

FEC Identification Number: C  
Transaction ID : SB22.I11324  
Amount of Each Disbursement this Period: 25900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 180671.55

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Team McHenry**

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1838

Purpose of Disbursement  
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	1	8		

FEC Identification Number

C [ ]

**Transaction ID : SB22.I11325**  
Amount of Each Disbursement this Period

[ ] 3200.00

BUILDING FUND

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 3200.00

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

[ ] 183871.55