

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

TREY GOWDY FOR CONGRESS

ADDRESS (number and street)

PO BOX 3324

Check if different than previously reported. (ACC)

SPARTANBURG

SC

29304

2. **FEC IDENTIFICATION NUMBER**

C C00462523

CITY

STATE

ZIP CODE

STATE DISTRICT

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

SC

04

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on 06 / 10 / 2014 in the State of SC

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

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

Election on / / in the State of

5. Covering Period

04 / 01 / 2014 through 05 / 21 / 2014

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

Type or Print Name of Treasurer Marvin Quattlebaum

Signature of Treasurer Marvin Quattlebaum

[Electronically Filed]

Date

05 / 27 / 2014

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TREY GOWDY FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	42205.00	477979.25
(b) Total Contribution Refunds (from Line 20(d))	0.00	6600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	42205.00	471379.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12191.51	130227.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	150.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12191.51	130077.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	353821.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TREY GOWDY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12575.00	184975.00
(ii) Unitemized	3130.00	11948.42
(iii) TOTAL of contributions from individuals	15705.00	196923.42
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	26500.00	281055.83
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	42205.00	477979.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	150.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	42205.00	478129.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12191.51	130227.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6600.00
21. OTHER DISBURSEMENTS	23000.00	269258.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35191.51	406085.50

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	346808.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	42205.00
25. SUBTOTAL (add Line 23 and Line 24).....	389013.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35191.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	353821.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MASON G. ALEXANDER

Mailing Address **1 BISHOP GADSDEN WAY**
APT. 348

City **CHARLESTON** State **SC** Zip Code **29412**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.12168

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARK ANTHONY AYCOCK

Mailing Address **249 INDIAN WELLS DRIVE**

City **SPARTANBURG** State **SC** Zip Code **29306**

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

Name of Employer **SPARTANBURG MEDICAL CENTER** Occupation **SYSTEM COO/PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.12188

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KAREN A. BLEDSOE

Mailing Address **700 NW GILMAN BLVD.**
#445

City **ISSAQUAH** State **WA** Zip Code **98027**

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

Name of Employer **RETIRED** Occupation **TECHNICAL WRITER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.12282

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BILLY ROSS CATON

Mailing Address **6 SUGARBERRY DRIVE**

City **GREENVILLE** State **SC** Zip Code **29615**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11Al.12196

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **9273 LERWICK DRIVE**

City **DUBLIN** State **OH** Zip Code **43017**

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

Name of Employer **CLARK, LYTLE, AND GELDUDIG** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Al.12150

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **9230 FORBES AVENUE**

City **NORTHRIDGE** State **CA** Zip Code **91343**

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

Name of Employer **UNEMPLOYED** Occupation **UNEMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Al.12319

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANE D. FULMER

Mailing Address 5209 ROSEWOOD CIRCLE

City State Zip Code
FORT SMITH AR 72903

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

Name of Employer Occupation
DANE FULMER INVESTMENTS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.12204

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH H. GIBSON

Mailing Address 5040 GLENBROOK TERRACE NW

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.12149

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 1816 CAPTAIN MATHES DRIVE

City State Zip Code
POWDER SPRINGS GA 30127

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

Name of Employer Occupation
DELTA AIR LINES AIR LINE PILOT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.12338

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

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

Mailing Address 1115 WOODBURN ROAD

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
SPARTANBURG REGIONAL HEALTHCAR PRESIDENT/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.12192

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 308 SAWGRASS LANE

City State Zip Code
BROUSSARD LA 70518

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.12156

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

Mailing Address 104 BEAR CREEK COURT

City State Zip Code
BROUSSARD LA 70518

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

Name of Employer Occupation
DOVE TRANSPORTATION OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.12152

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) SCOTT E. PORTER		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 709 SPAULDING FARM ROAD		Transaction ID : SA11AI.12165
City GREENVILLE	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer GREENVILLE HOSPITAL SYSTEM	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) JOHN ANTHONY RAINONE		Date of Receipt M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 12 LANDERS ROAD		Transaction ID : SA11AI.12284
City READING	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RAYTHEON CORPORATION	Occupation FINANCE AND FACILITY MANAGER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) KATHY SINCLAIR		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 226 N. LAKE EMORY DIRVE		Transaction ID : SA11AI.12194
City INMAN	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SPARTANBURG REGIONAL HEALTHCAR	Occupation VP/HR	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

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

Mailing Address 11006 BOOTH AVENUE

City KANSAS CITY State MO Zip Code 64134

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2014

Transaction ID : SA11AI.12348

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIMOTHY J. YEATMAN

Mailing Address 5 TROPICANA COURT

City GREENVILLE State SC Zip Code 29609

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

Name of Employer GIBBS RESEARCH INSTITUTE Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.12190

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1025.00

12575.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

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

Mailing Address **WORLDWIDE HEADQUARTERS**
1932 WYNNNTON ROAD

City **COLUMBUS** State **GA** Zip Code **31999**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12213

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. Akard Street**
Suite 3521

City **Dallas** State **TX** Zip Code **75202**

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11C.12173

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BEST BUY CO., INC EMPLOYEE POLITICAL FORUM

Mailing Address **7601 PENN AVENUE SOUTH**

City **RICHFIELD** State **MN** Zip Code **55423**

FEC ID number of contributing federal political committee. **C C00405076**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12211

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

Mailing Address 410 SEVENTEENTH STREET
SUITE 2200

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11C.12182

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 JFK Blvd, 49th Floor
35th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 19 / 2014

Transaction ID : SA11C.12215

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1400 16TH STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 17 / 2014

Transaction ID : SA11C.12171

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2000.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

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

Mailing Address 25 East Main Street, Suite 200

City Richmond State VA Zip Code 23219

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12216

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

Mailing Address 1299 Pennsylvania Ave NW Suite 900W

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11C.12180

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HEALTHCARE DISTRIBUTION MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 901 N. GLEBE ROAD, SUITE 1000

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00247569

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11C.12178

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014

Transaction ID : SA11C.12170

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 CRYSTAL DRIVE SUITE 300

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11C.12181

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 Telestar Ct.

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2014

Transaction ID : SA11C.12214

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALEERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King Street
Suite 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12217

Amount of Each Receipt this Period
4000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11C.12176

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL CONCRETE MASONRY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 13750 SUNRISE VALLEY DRIVE

City HERNDON State VA Zip Code 20171

FEC ID number of contributing federal political committee. **C** C00128975

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11C.12174

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

5500.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Mailing Address 469 HOSPITAL DR.
SUITE C

City State Zip Code
GASTONIA NC 28054

FEC ID number of contributing federal political committee. **C** C00405555

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12212

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 1200 WILSON BLVD

City State Zip Code
ARLINGTON VA 22209

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11C.12172

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1627 EYE STREET NW SUITE 900

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11C.12210

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

3000.00

26500.00

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address GLENRIDGE HIGHLANDS TWO, 5565		Amount of Each Disbursement this Period 139.05 Transaction ID : SB17.12236
City ATLANTA State GA Zip Code 30342	Purpose of Disbursement CELL PHONE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY (DATA COVERAGE)		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address POST OFFICE BOX 537104		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.12256
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement DATA COVERAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T MOBILITY (DATA COVERAGE)		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address POST OFFICE BOX 537104		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.12264
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement DATA COVERAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	199.05
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 1286.52
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT FOOD	Transaction ID : SB17.12233
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 300 FIRST STREET SE		Amount of Each Disbursement this Period 778.67
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT FOOD	Transaction ID : SB17.12255
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. GLOBALVISION		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 301 NORTH MAIN STREET SUITE 1119		Amount of Each Disbursement this Period 36.00
City GREENVILLE	State SC	
Zip Code 29601	Purpose of Disbursement PHONE LINE	Transaction ID : SB17.12231
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2101.19
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GLOBALVISION		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 301 NORTH MAIN STREET SUITE 1119		Amount of Each Disbursement this Period 36.00 Transaction ID : SB17.12254
City GREENVILLE State SC Zip Code 29601	Purpose of Disbursement PHONE LINE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TREY GOWDY		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO BOX 3324		Amount of Each Disbursement this Period 72.00 Transaction ID : SB17.12230
City SPARTANBURG State SC Zip Code 29304	Purpose of Disbursement MILEAGE Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 04	

Full Name (Last, First, Middle Initial) C. TREY GOWDY		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address PO BOX 3324		Amount of Each Disbursement this Period 139.91 Transaction ID : SB17.12251
City SPARTANBURG State SC Zip Code 29304	Purpose of Disbursement PARKING, TAXI, MILEAGE Candidate Name Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 04	

SUBTOTAL of Disbursements This Page (optional).....	247.91
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TREY GOWDY		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO BOX 3324		Amount of Each Disbursement this Period 36.52 Transaction ID : SB17.12253
City SPARTANBURG	State SC	
Zip Code 29304	Purpose of Disbursement EVENT FOOD-NO ITEM REQUIRED	Category/ Type 003
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 04	

Full Name (Last, First, Middle Initial) B. Mrs. MELISSA HOUSE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 623 MOUNT VERNON LANE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12218
City DUNCAN	State SC	
Zip Code 29334	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Mrs. MELISSA HOUSE		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 623 MOUNT VERNON LANE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12250
City DUNCAN	State SC	
Zip Code 29334	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2036.52
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 401 WEST 15TH STREET SUITE 520		Amount of Each Disbursement this Period 48.84 Transaction ID : SB17.12277
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement CREDIT CARD PROCESSING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 401 WEST 15TH STREET SUITE 520		Amount of Each Disbursement this Period 117.22 Transaction ID : SB17.12278
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement CREDIT CARD PROCESSING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE GULA GRAHAM GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 420		Amount of Each Disbursement this Period 129.21 Transaction ID : SB17.12219
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement SHIPPING AND COMMUNICATIONS Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	295.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE GULA GRAHAM GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 420		Amount of Each Disbursement this Period 4.38 Transaction ID : SB17.12229
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement SHIPPING Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE GULA GRAHAM GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 420		Amount of Each Disbursement this Period 3240.00 Transaction ID : SB17.12232
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE GULA GRAHAM GROUP		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 420		Amount of Each Disbursement this Period 3285.09 Transaction ID : SB17.12252
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement COMMUNICATIONS, EVENT FOOD, SHIPPING Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	6529.47
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE STONERIDGE GROUP, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 4400 NORTH POINT PARKWAY SUITE 190			Amount of Each Disbursement this Period 19.95	
City ALPHARETTA	State GA	Zip Code 30022	Transaction ID : SB17.12257	
Purpose of Disbursement WEBSITE MAINTENANCE		Category/Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. THE STONERIDGE GROUP, LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address 4400 NORTH POINT PARKWAY SUITE 190			Amount of Each Disbursement this Period 19.95	
City ALPHARETTA	State GA	Zip Code 30022	Transaction ID : SB17.12265	
Purpose of Disbursement WEBSITE MAINTENANCE		Category/Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. U-STOR			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 1016 SOUTH PINE STREET			Amount of Each Disbursement this Period 50.00	
City SPARTANBURG	State SC	Zip Code 29302	Transaction ID : SB17.12258	
Purpose of Disbursement STORAGE UNIT		Category/Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	89.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U-STOR		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1016 SOUTH PINE STREET		Amount of Each Disbursement this Period 52.00 Transaction ID : SB17.12266
City SPARTANBURG State SC Zip Code 29302	Purpose of Disbursement STORAGE UNIT Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED STATES POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 250 SOUTH CHURCH STREET		Amount of Each Disbursement this Period 146.00 Transaction ID : SB17.12271
City SPARTANBURG State SC Zip Code 29302	Purpose of Disbursement PO BOX RENTAL Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4000 E. SKY HARBOR BOULEVARD		Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.12260
City PHOENIX State AZ Zip Code 85034	Purpose of Disbursement SERVICE FEE Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	216.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 4000 E. SKY HARBOR BOULEVARD		Amount of Each Disbursement this Period 347.50
City PHOENIX	State AZ Zip Code 85034	
Purpose of Disbursement TRAVEL	Category/Type 002	Transaction ID : SB17.12261
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	347.50
TOTAL This Period (last page this line number only).....	12062.81

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 28	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COAKLEY FOR CONGRESS ELECTION COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 480279		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12246
City CHARLOTTE State NC Zip Code 28269	Purpose of Disbursement CONTRIBUTION 011 Category/Type	
Candidate Name VINCENT EDWARD COAKLEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NC District: 12		

Full Name (Last, First, Middle Initial) B. GREATER SPARTANBURG MINISTRIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 680 ASHEVILLE HIGHWAY		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12227
City SPARTANBURG State SC Zip Code 29303	Purpose of Disbursement DONATION 012 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HOUSE LIBERTY FUND		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 701 8TH STREET NW SUITE 500		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB21.12244
City WASHINGTON State DC Zip Code 20001	Purpose of Disbursement CONTRIBUTION 008 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 28			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOUDERMILK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO BOX 447		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12238
City CASSVILLE	State GA	
Zip Code 30123	Purpose of Disbursement CONTRIBUTION	Category/ Type 011
Candidate Name BARRY LOUDERMILK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA	District: 11	

Full Name (Last, First, Middle Initial) B. MOONEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address P.O. BOX 1863		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.12239
City MARTINSBURG	State WV	
Zip Code 25402	Purpose of Disbursement CONTRIBUTION	Category/ Type 011
Candidate Name ALEXANDER XAVIER MOONEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV	District: 02	

Full Name (Last, First, Middle Initial) C. SOUTH CAROLINA REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address P.O. Box 12373		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB21.12235
City Columbia	State SC	
Zip Code 29211	Purpose of Disbursement TRANSFER	Category/ Type 008
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

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

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

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TERRI LYNN LAND FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 308		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.12221
City GRANDVILLE State MI Zip Code 49418	Purpose of Disbursement CONTRIBUTION 011 Category/Type	
Candidate Name TERRI LYNN LAND		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: 00	

Full Name (Last, First, Middle Initial) B. TERRI LYNN LAND FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 308		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.12226
City GRANDVILLE State MI Zip Code 49418	Purpose of Disbursement CONTRIBUTION 011 Category/Type	
Candidate Name TERRI LYNN LAND		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: 00	

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

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	23000.00