

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LOUIE GOHMERT FOR CONGRESS COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2015 To: M M / D D / Y Y Y Y 06 / 30 / 2015

	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))....	61810.00	91970.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61810.00	91970.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	64965.53	150604.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3342.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64965.53	147261.48
8. Cash on Hand at Close of Reporting Period (from Line 27).....	131734.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

LOUIE GOHMERT FOR CONGRESS COMMITTEE

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).....	48375.00	68843.00
(ii) Unitemized.....	1435.00	5877.00
(iii) TOTAL of contributions from individuals ▶	49810.00	74720.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	17250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61810.00	91970.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	3342.90
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)..... ▶	61810.00	95312.90

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64965.53	150604.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	4000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	3500.00	5800.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	68465.53	160404.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	138390.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61810.00
25. SUBTOTAL (add Line 23 and Line 24).....	200200.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68465.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	131734.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Nolan Alders

Mailing Address 5437 E. State Hwy 7

City State Zip Code
Nacogdoches TX 75961

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11AI.41486

Amount of Each Receipt this Period
500.00

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

Mailing Address 3310 S Broadway Ave
Ste 100

City State Zip Code
Tyler TX 75701-7851

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

Name of Employer Occupation
Henry & Peters P C C. P. A.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41514

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
James W Arnold

Mailing Address P. O. Box 6566

City State Zip Code
Tyler TX 75711

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

Name of Employer Occupation
Self Oil & Gas

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41526

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Janis Steven Arnold		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 242 Parklane Dr.		Transaction ID : SA11AI.41413	
City San Antonio	State TX	Zip Code 78212	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Billy D. Bankston		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 1704 Clarendon		Transaction ID : SA11AI.41451	
City Longview	State TX	Zip Code 75601	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer East Texas Mac Sales LP	Occupation Heavy Truck Dealer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Barbara Bass		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 1606 Jeb Stuart Dr.		Transaction ID : SA11AI.41429	
City Tyler	State TX	Zip Code 75703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Gollob, Morgan, Petty & Co., P. C.	Occupation C. P. A.		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	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 7 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Jean Brannon		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 23 / 2015	
Mailing Address 3801 Glendale Dr		Transaction ID : SA11AI.41458	
City Tyler	State TX	Zip Code 75701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) B. V. Kevin Burdette		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2015	
Mailing Address 14820 CR 2333		Transaction ID : SA11AI.41512	
City Whitehouse	State TX	Zip Code 75791	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Green Acres Baptist Church	Occupation Minister		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. John C Calhoun		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2015	
Mailing Address 440 Oakwood Ave		Transaction ID : SA11AI.41247	
City Clarklake	State MI	Zip Code 49234	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Info Requested	Occupation Info Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	3450.00
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 8 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Penny Carlile

Mailing Address 1595 Garden Oaks Dr.

City Marshall State TX Zip Code 75672

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41537

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3304 S. Broadway Suite 100

City Tyler State TX Zip Code 75701

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

Name of Employer Horizon Business Group Occupation Business Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41461

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
William H Choate

Mailing Address 11450 Culver Rd

City Cement City State MI Zip Code 49233

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015

Transaction ID : SA11AI.41249

Amount of Each Receipt this Period
 1500.00

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

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

4450.00

**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 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Stephen Dement

Mailing Address 511 Quail Creek Dr.

City State Zip Code
Tyler TX 75703

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

Name of Employer Occupation
Landmark Title, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41415

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Diana D Denman

Mailing Address PO Box 6009

City State Zip Code
San Antonio TX 78209

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

Name of Employer Occupation
Info Requested Info Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.41164

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Joe C. Denman III

Mailing Address 112 Suntory Wan

City State Zip Code
Lufkin TX 75901

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

Name of Employer Occupation
Executive Vice President First Bank & Trust

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41416

Amount of Each Receipt this Period
250.00

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

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

3450.00

**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 10 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Sherrill Echols

Mailing Address 1704 Royal Oaks

City Tyler State TX Zip Code 75703

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41515

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
D. (legal name) M. Edwards

Mailing Address 3600 Jill Circle

City Tyler State TX Zip Code 75701

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

Name of Employer Edwards Investments Occupation C E O

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41462

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ari Joshua Feinstein

Mailing Address 5819 Brentwood Tr

City Dallas State TX Zip Code 75252

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

Name of Employer Owner Occupation Annex Ventures Inc

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2015

Transaction ID : SA11AI.41203

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 11 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ben Ferrell

Mailing Address 1521 Rice Rd L-102

City Tyler State TX Zip Code 75703

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41417

Amount of Each Receipt this Period
 500.00

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

Mailing Address 755 Michigan Ave

City Jackson State MI Zip Code 48201

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

Name of Employer State of Michigan Occupation Judge

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015

Transaction ID : SA11AI.41251

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Laura R. Geese

Mailing Address 16517 Big Oak Bay Rd.

City Tyler State TX Zip Code 75707

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41513

Amount of Each Receipt this Period
 250.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 12 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Robin J. Geese

Mailing Address 5903 Churchill Dr

City State Zip Code
Tyler TX 75703

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

Name of Employer Occupation
Housewife Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41516

Amount of Each Receipt this Period
250.00

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

Mailing Address 1101 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation
The Gibson Group President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41454

Amount of Each Receipt this Period
500.00

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

Mailing Address 18320 FM Rd. 16 E

City State Zip Code
Winona TX 75792

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

Name of Employer Occupation
State of Texas Judge

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41418

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Colin A Hanna

Mailing Address 603 Fairway Dr

City West Chester	State PA	Zip Code 19382
----------------------	-------------	-------------------

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

Name of Employer Let Freedom Ring	Occupation President
--------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11AI.41166

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. John F. Hudnall

Mailing Address 3407 Heines Dr

City Tyler	State TX	Zip Code 75701
---------------	-------------	-------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11AI.41484

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr Kevin L Hudson

Mailing Address 1405 Live Oak Ln

City Lufkin	State TX	Zip Code 75901
----------------	-------------	-------------------

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

Name of Employer Heart Institute of East Texas	Occupation Physician
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015

Transaction ID : SA11AI.41481

Amount of Each Receipt this Period
500.00

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 14 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Harold T. Hyde

Mailing Address 5803 Covey Lane

City Tyler State TX Zip Code 75703

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

Name of Employer Tylex Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41518

Amount of Each Receipt this Period
 500.00

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

Mailing Address P. O. Box 6966

City Tyler State TX Zip Code 75711

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11AI.41386

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Lisa R. Jones

Mailing Address 250 Pecan Creek Dr.

City Henderson State TX Zip Code 75654

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

Name of Employer Self Occupation Piano Teacher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 17 / 2015

Transaction ID : SA11AI.41405

Amount of Each Receipt this Period
 1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 15 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ernest J LaFlure

Mailing Address 17641 CR 15

City Tyler State TX Zip Code 75703

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

Name of Employer EGO Resources Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : SA11AI.41487

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
David A. Lake

Mailing Address P. O. Box 6776

City Tyler State TX Zip Code 75711

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41538

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Bobby L Langford

Mailing Address 744 CR 461

City Carthage State TX Zip Code 75633

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41519

Amount of Each Receipt this Period
 2700.00

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

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

4200.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 16 OF 81

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

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

Mailing Address 5300 North Street

City Nacogdoches State TX Zip Code 75961

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2015

Transaction ID : SA11AI.41492

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
Dr. Robert P. Lehmann

Mailing Address 5300 North Street

City Nacogdoches State TX Zip Code 75961

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2015

Transaction ID : SA11AI.41490

Amount of Each Receipt this Period
 2700.00

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

Mailing Address 100 Azalea Way

City Marshall State TX Zip Code 75672

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41419

Amount of Each Receipt this Period
 500.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 17 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Walter Locke

Mailing Address 2111 Woodmont Rd

City State Zip Code
Alexandria VA 22307

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

Name of Employer Occupation
The Smith-Free Group Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11AI.41391

Amount of Each Receipt this Period
225.00

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

Mailing Address 810 Ashford Ct.

City State Zip Code
Tyler TX 75703

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

Name of Employer Occupation
UBS Financial Services Investment Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41421

Amount of Each Receipt this Period
250.00

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

Mailing Address 1411 Bending Brook

City State Zip Code
Lufkin TX 75904

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

Name of Employer Occupation
Self Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41422

Amount of Each Receipt this Period
250.00

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

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

725.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr. Donald L. McLaugherty		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 10129 Lakeshore Dr.		Transaction ID : SA11AI.41452	
City Tyler	State TX	Zip Code 75707	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer University of Texas at Tyler	Occupation Professor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Austin P. Merritt Jr.		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2015	
Mailing Address P. O. Box 1209		Transaction ID : SA11AI.41431	
City Kilgore	State TX	Zip Code 75663	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Eric R Meyers		Date of Receipt M M / D D / Y Y Y Y Y 06 / 08 / 2015	
Mailing Address 515 NW County Rd 0011		Transaction ID : SA11AI.41348	
City Corsicana	State TX	Zip Code 75110	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Oil City Iron Works Inc	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	3250.00
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 19 OF 81
	<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	

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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Larry Meyers		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 23 / 2015
Mailing Address 412 First St SE		Transaction ID : SA11AI.41453
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Meyers & Associates	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Lisa C Mueller		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015
Mailing Address 707 Purdue Dr		Transaction ID : SA11AI.41424
City Tyler	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Karen Olsen		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2015
Mailing Address 4615 Dundee		Transaction ID : SA11AI.41520
City Tyler	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Housewife	Occupation ,	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 20 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard Perryman

Mailing Address 100 Independence Pl
Ste 201

City Tyler State TX Zip Code 75703

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

Name of Employer Self Occupation C P A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41527

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Rogers Pope Jr.

Mailing Address P. O. Box 3188

City Longview State TX Zip Code 75606

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

Name of Employer Texas Bank & Trust Occupation Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41522

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dr. Paul Powell

Mailing Address 5603 Elderwood

City Tyler State TX Zip Code 75703

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

Name of Employer Self Occupation Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41425

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 21 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joan Price

Mailing Address 331 Story Lake Dr

City Tyler State TX Zip Code 75707

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

Name of Employer Self Occupation Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41426

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1311 Balmoral Dr

City Tyler State TX Zip Code 75703

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 20 / 2015

Transaction ID : SA11AI.41411

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Raymond B Ruddy

Mailing Address 26 Rolling Ln

City Dover State MA Zip Code 02030

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : SA11AI.41294

Amount of Each Receipt this Period
 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Myrtis D. Smith

Mailing Address 3011 Old Bullard Road

City Tyler State TX Zip Code 75701

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.41428

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Eleanor A. Stringer

Mailing Address 2424 Old Bullard Road

City Tyler State TX Zip Code 75701

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

Name of Employer Self Occupation Investments

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41480

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ben E. Sutton

Mailing Address P. O. Box 521

City Tyler State TX Zip Code 75710

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

Name of Employer Self Occupation Oil & Gas

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41528

Amount of Each Receipt this Period
 250.00

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 23 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

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

Mailing Address 2006 Fountain Bleau Ave

City Longview State TX Zip Code 75605

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11AI.41388

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Linda Ryan Thomas

Mailing Address 206 Fountain Bleau Ave

City Longview State TX Zip Code 75605

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11AI.41390

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Kenneth W. Threlkeld

Mailing Address 803 Tallyho

City Tyler State TX Zip Code 75701

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

Name of Employer Threlkeld & Co. Occupation Insurance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41529

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 81
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jim Toman

Mailing Address 3918 Charleston Park

City Tyler State TX Zip Code 75701

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

Name of Employer Jim Toman Agency Occupation Insurance Agent

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015

Transaction ID : SA11AI.41347

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Gary R. Traylor

Mailing Address 3610 Oak Leaf Circle

City Tyler State TX Zip Code 75707

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

Name of Employer Self Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41463

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Jin Lin Ulmer

Mailing Address 401 Crown Colony Dr.

City Lufkin State TX Zip Code 75901

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2015

Transaction ID : SA11AI.41408

Amount of Each Receipt this Period
 500.00

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 25 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George N. Winn

Mailing Address 4708 Picadilly Place

City State Zip Code
Tyler TX 75703

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

Name of Employer Occupation
George Winn Real Estate Real Estate Broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11AI.41525

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jerry P. Yandell

Mailing Address 1441 Tall Timbers Dr.

City State Zip Code
Tyler TX 75703

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11AI.41464

Amount of Each Receipt this Period
250.00

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).....

500.00

48375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 81
	<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	

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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address 1101 17 Street N.W. Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C.41532

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ELECTRIC POWER COMMITTEE FOR RESPONSIBLE GOVERNMENT, THE

Mailing Address 1 Riverside Plaza - 26th Floor
P.O. Box 16036

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11C.41536

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

Mailing Address 1006 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA11C.41100

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE AMERICA NOW PAC

Mailing Address 424 EAST 10TH STREET
#3D

City State Zip Code
NEW YORK NY 10009

FEC ID number of contributing federal political committee. **C** C00553313

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11C.41494

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
COVINGTON AND BURLING LLP PAC

Mailing Address 1201 PENNSYLVANIA AVENUE, NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00462630

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SA11C.41457

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 TOWNSEND STREET
SUITE 900

City State Zip Code
LANSING MI 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : SA11C.41246

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

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

Mailing Address P.O. BOX 618

City ALTON State IL Zip Code 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C.41172

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
FREEDOM'S DEFENSE FUND

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

FEC ID number of contributing federal political committee. **C** C00401786

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11C.41455

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1201 N ORANGE ST STE 700 #7427

City WILMINGTON State DE Zip Code 19801

FEC ID number of contributing federal political committee. **C** C00563759

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : SA11C.41409

Amount of Each Receipt this Period
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 4521 Windsor Arms CT

City Annandale	State VA	Zip Code 22003
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00358051

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : SA11C.41171

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
POWER POLITICAL ACTION COMMITTEE OF ENERGY FUTURE HOLDINGS CORP.

Mailing Address 1601 Bryan St.
EP27

City Dallas	State TX	Zip Code 75201
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00255950

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : SA11C.41301

Amount of Each Receipt this Period

2000.00

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

Mailing Address PO BOX 7711

City ARLINGTON	State VA	Zip Code 22207
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00458588

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11C.41496

Amount of Each Receipt this Period

500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

A. Full Name (Last, First, Middle Initial)
WEYERHAEUSER COMPANY POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 75000
MC: 2250

City State Zip Code
Detroit MI 48275

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11C.41169

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

12000.00

**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 31 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Aircell Gogo Inflight		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 1250 N Arlington Heights Rd Ste 50		Amount of Each Disbursement this Period 39.95 Transaction ID : SB17.41162
City Itasca	State IL	
Zip Code 60143	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Aircell Gogo Inflight		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 1250 N Arlington Heights Rd Ste 50		Amount of Each Disbursement this Period 39.95 Transaction ID : SB17.41283
City Itasca	State IL	
Zip Code 60143	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Aircell Gogo Inflight		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1250 N Arlington Heights Rd Ste 50		Amount of Each Disbursement this Period 39.95 Transaction ID : SB17.41438
City Itasca	State IL	
Zip Code 60143	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	119.85
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 32 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 958.30 Transaction ID : SB17.41158
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 497.10 Transaction ID : SB17.41202
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Tickets	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 411.20 Transaction ID : SB17.41211
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	958.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 81.73
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41221
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01	Category/Type 002	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 388.10
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41281
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01	Category/Type 002	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 376.20
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Tickets	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41305
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	846.03
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 543.46 Transaction ID : SB17.41308
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.41317
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 390.60 Transaction ID : SB17.41356
City State Zip Code DFW Airport TX 75261	Purpose of Disbursement Airline Ticket 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	994.06
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 35 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 49.80
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airline Ticket	Transaction ID : SB17.41361
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 06 / 16 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 655.20
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airline Tickets	Transaction ID : SB17.41434
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 403.20
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airline Ticket	Transaction ID : SB17.41466
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1108.20
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 36 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 886.20 Transaction ID : SB17.41505
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airline Tickets	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address P. O. Box 619616		Amount of Each Disbursement this Period 1418.70 Transaction ID : SB17.41540
City DFW Airport	State TX	
Zip Code 75261	Purpose of Disbursement Airline Ticket	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 60 Massachusetts Avenue, N.E.		Amount of Each Disbursement this Period 267.00 Transaction ID : SB17.41443
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Transportation	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2571.90
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 37 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 60 Massachusetts Avenue, N.E.		Amount of Each Disbursement this Period 184.00 Transaction ID : SB17.41469
City Washington State DC Zip Code 20002	Purpose of Disbursement Transportations 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. AOL		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 35.81 Transaction ID : SB17.41307
City New Your State NY Zip Code 10003	Purpose of Disbursement Internet Service 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) C. AOL		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 35.81 Transaction ID : SB17.41471
City New Your State NY Zip Code 10003	Purpose of Disbursement Internet Service 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	255.62
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 38 OF 81		
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. A T & T		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 126.45 Transaction ID : SB17.41117
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A T & T		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 69.05 Transaction ID : SB17.41179
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A T & T		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 108.89 Transaction ID : SB17.41180
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	304.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. A T & T		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 67.92 Transaction ID : SB17.41287
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A T & T		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 117.70 Transaction ID : SB17.41312
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A T & T		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 67.92 Transaction ID : SB17.41447
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	253.54
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 40 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. A T & T		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015
Mailing Address P O Box 630047		Amount of Each Disbursement this Period 117.71 Transaction ID : SB17.41475
City Dallas State TX Zip Code 75263	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2017 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. A T & T Mobility		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address P O Box 650553		Amount of Each Disbursement this Period 458.55 Transaction ID : SB17.41118
City Dallas State TX Zip Code 75265	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. A T & T Mobility		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2015
Mailing Address P O Box 650553		Amount of Each Disbursement this Period 701.53 Transaction ID : SB17.41154
City Dallas State TX Zip Code 75265	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1277.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. A T & T Mobility		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address P O Box 650553		Amount of Each Disbursement this Period 467.28 Transaction ID : SB17.41261
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. A T & T Mobility		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address P O Box 650553		Amount of Each Disbursement this Period 469.56 Transaction ID : SB17.41383
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Bill Day Tire Center		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2015
Mailing Address S. Broadway		Amount of Each Disbursement this Period 526.63 Transaction ID : SB17.41369
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Tires	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1463.47
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 42 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 209 Pennsylvania Avenue Southeast		Amount of Each Disbursement this Period 331.78
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41113
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 209 Pennsylvania Avenue Southeast		Amount of Each Disbursement this Period 761.90
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41178
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 209 Pennsylvania Avenue Southeast		Amount of Each Disbursement this Period 661.21
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41277
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1754.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 209 Pennsylvania Avenue Southeast		Amount of Each Disbursement this Period 1485.04 Transaction ID : SB17.41382
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 209 Pennsylvania Avenue Southeast		Amount of Each Disbursement this Period 468.00 Transaction ID : SB17.41448
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Capitol Host		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address Rm B-339V Rayburn House Bldg		Amount of Each Disbursement this Period 436.84 Transaction ID : SB17.41228
City Washington State DC Zip Code 20515	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	2389.84
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 44 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Cole Cellular		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address S Broadway		Amount of Each Disbursement this Period 135.31
City Tyler	State TX	
Zip Code 75703	Purpose of Disbursement Cell Phone Repair	Transaction ID : SB17.41370
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 05 / 05 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 587.10
City Atlanta	State GA	
Zip Code 30354	Purpose of Disbursement Airline Ticket	Transaction ID : SB17.41238
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Delta Airlines		Date of Disbursement MM / DD / YYYY 05 / 07 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 300.00
City Atlanta	State GA	
Zip Code 30354	Purpose of Disbursement Airline Ticket	Transaction ID : SB17.41254
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1022.41
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 45 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 1011.60 Transaction ID : SB17.41371
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Airline Tickets 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Donor Fundraising Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2015
Mailing Address 815 Brazos Ste 701		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.41280
City Austin State TX Zip Code 78701	Purpose of Disbursement Event Retainer 003 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Eddie Deen & Co		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2015
Mailing Address 1102 South Virginia Street		Amount of Each Disbursement this Period 6772.40 Transaction ID : SB17.41501
City Terrell State TX Zip Code 75160	Purpose of Disbursement Fundraiser 007 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	10284.00
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 46 OF 81		
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 42.48 Transaction ID : SB17.41107
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 35.78 Transaction ID : SB17.41133
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 32.12 Transaction ID : SB17.41153
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	110.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 33.89
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41176
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 43.15
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41190
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 47.07
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41229
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	124.11
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 48 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 17.14 Transaction ID : SB17.41237
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 36.51 Transaction ID : SB17.41240
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) C. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 42.31 Transaction ID : SB17.41278
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	95.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 81		
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement MM / DD / YYYY 05 / 19 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 33.01 Transaction ID : SB17.41292
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Tyler		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 19.15 Transaction ID : SB17.41320
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) C. Exxon/Mobil Tyler		Date of Disbursement MM / DD / YYYY 06 / 05 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 29.50 Transaction ID : SB17.41353
City Tyler	State TX	
Zip Code 75701	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	81.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 46.77
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41363
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 47.83
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41441
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Exxon/Mobil Tyler		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 83.92
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41497
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	178.52
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 51 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Exxon/Mobil Tyler		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 2204 E SE Loop 323		Amount of Each Disbursement this Period 45.53 Transaction ID : SB17.41544
City Tyler	State TX	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Exxon/Mobil Washington		Date of Disbursement MM / DD / YYYY 05 / 20 / 2015
Mailing Address 5030 Connecticut Ave NW		Amount of Each Disbursement this Period 33.01 Transaction ID : SB17.41303
City Washington	State DC	
Purpose of Disbursement Gasoline	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) C. FedEx Kinko		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 2625 E. Erwin		Amount of Each Disbursement this Period 39.72 Transaction ID : SB17.41339
City Tyler	State TX	
Purpose of Disbursement Shipping	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	118.26
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 81	
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Four Seasons Hotel		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 2800 Pennsylvania Ave NW		Amount of Each Disbursement this Period 227.76
City Washington State DC Zip Code 20007	Purpose of Disbursement Hotel	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41209
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 819.06
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41160
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

Full Name (Last, First, Middle Initial) c. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 162.69
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41189
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional)	1209.51
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41272
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41290
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41343
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	218.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41373
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41402
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Hill Country Barbecue		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2015
Mailing Address 410 7th St NW		Amount of Each Disbursement this Period 72.93 Transaction ID : SB17.41499
City Washington State DC Zip Code 20004	Purpose of Disbursement Meeting 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	218.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Holiday Inn - Boston		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 5 Blossom St		Amount of Each Disbursement this Period 262.09 Transaction ID : SB17.41315
City Boston	State MA	
Purpose of Disbursement Hotel	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Holiday Inn Washington		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1155 14th St NW		Amount of Each Disbursement this Period 978.23 Transaction ID : SB17.41433
City Washington	State DC	
Purpose of Disbursement Hotel	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Holiday Inn Washington		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 1155 14th St NW		Amount of Each Disbursement this Period 897.58 Transaction ID : SB17.41465
City Washington	State DC	
Purpose of Disbursement Hotel	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2137.90
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 56 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Hyatt Hotel Dallas		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address PO Box 619014		Amount of Each Disbursement this Period 429.04 Transaction ID : SB17.41396
City DFW Airport	State TX Zip Code 75261	
Purpose of Disbursement Hotel	Category/Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Info Peoplesmart		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address PO Box 391146		Amount of Each Disbursement this Period 39.90 Transaction ID : SB17.41231
City Omaha	State NE Zip Code 68139	
Purpose of Disbursement Information	Category/Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Info Peoplesmart		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address PO Box 391146		Amount of Each Disbursement this Period 39.90 Transaction ID : SB17.41341
City Omaha	State NE Zip Code 68139	
Purpose of Disbursement Information	Category/Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	508.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Liberty Phone Center Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address PO Box 8265		Amount of Each Disbursement this Period 634.11 Transaction ID : SB17.41215
City Springfield	State VA	
Zip Code 22151	Purpose of Disbursement Solicitations	Category/ Type 003
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Mr. Wm. L. (Bill) Long		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 8236 Columbia Dr.		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.41121
City Tyler	State TX	
Zip Code 75703	Purpose of Disbursement Accounting, Data Entry, Post Office, Banking	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Mr. Wm. L. (Bill) Long		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address 8236 Columbia Dr.		Amount of Each Disbursement this Period 306.61 Transaction ID : SB17.41182
City Tyler	State TX	
Zip Code 75703	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2440.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 81	
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Wm. L. (Bill) Long		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015
Mailing Address 8236 Columbia Dr.		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.41227
City Tyler	State TX	
Purpose of Disbursement Accounting, Data Entry, Post Office, Banking		Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Mr. Wm. L. (Bill) Long		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 8236 Columbia Dr.		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.41337
City Tyler	State TX	
Purpose of Disbursement Accounting, Data Entry, Post Office, Banking		Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. National Car Rental		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 10124 Natural Bridge Rd		Amount of Each Disbursement this Period 158.68 Transaction ID : SB17.41357
City St Louis	State MO	
Purpose of Disbursement Car Rent		Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional)	3158.68
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 81	
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. New York City Taxi		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address 70 Park Ave		Amount of Each Disbursement this Period 74.95 Transaction ID : SB17.41319
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Taxi	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Norfleet Strategies LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2015
Mailing Address 1801 Lavaca Ste 106		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.41111
City Austin	State TX	
Zip Code 78701	Purpose of Disbursement Professional Services	Category/ Type 003
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Norfleet Strategies LLC		Date of Disbursement MM / DD / YYYY 04 / 28 / 2015
Mailing Address 1801 Lavaca Ste 106		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.41207
City Austin	State TX	
Zip Code 78701	Purpose of Disbursement Professional Services	Category/ Type 003
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	3074.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Norfleet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015		
Mailing Address 1801 Lavaca Ste 106			Amount of Each Disbursement this Period 1500.00		
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.41395		
Purpose of Disbursement Professional Services		Category/ Type 003			
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: TX	District: 01				

Full Name (Last, First, Middle Initial) B. Norfleet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015		
Mailing Address 1801 Lavaca Ste 106			Amount of Each Disbursement this Period 1500.00		
City Austin	State TX	Zip Code 78701	Transaction ID : SB17.41506		
Purpose of Disbursement Professional Services		Category/ Type 003			
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: TX	District: 01				

Full Name (Last, First, Middle Initial) c. Office Depot			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015		
Mailing Address 4329 Old Bullard Rd			Amount of Each Disbursement this Period 194.82		
City Tyler	State TX	Zip Code 75703	Transaction ID : SB17.41124		
Purpose of Disbursement Office Supplies		Category/ Type 001			
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: TX	District: 01				

SUBTOTAL of Disbursements This Page (optional).....	3194.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OnStar		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 32.37
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41125
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. OnStar		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 32.37
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41188
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. OnStar		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 32.37
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41193
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	97.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OnStar		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 32.37
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41236
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. OnStar		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 38.54
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41302
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. OnStar		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 38.54
City Detroit	State MI	
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Transaction ID : SB17.41306
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	109.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. OnStar		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 32.37
City Detroit	State MI	
Zip Code 48277	Purpose of Disbursement Telephone	Transaction ID : SB17.41352
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. OnStar		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address P O Box 77000		Amount of Each Disbursement this Period 77.08
City Detroit	State MI	
Zip Code 48277	Purpose of Disbursement Telephone	Transaction ID : SB17.41470
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Parking Concepts		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 1801 South Georgia St		Amount of Each Disbursement this Period 116.91
City Los Angeles	State CA	
Zip Code 90015	Purpose of Disbursement Parking	Transaction ID : SB17.41282
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	226.36
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 64 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Parking Concepts		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1801 South Georgia St		Amount of Each Disbursement this Period 116.91 Transaction ID : SB17.41437
City Los Angeles	State CA	
Purpose of Disbursement Parking	Category/ Type 002	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. RA @ Rayburn		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2015
Mailing Address 45 Independence Avenue SW		Amount of Each Disbursement this Period 14.50 Transaction ID : SB17.41285
City Washington	State DC	
Purpose of Disbursement Gifts for Supporters	Category/ Type 003	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. RA @ Rayburn		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 45 Independence Avenue SW		Amount of Each Disbursement this Period 228.70 Transaction ID : SB17.41446
City Washington	State DC	
Purpose of Disbursement Gifts for Supporters	Category/ Type 003	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	360.11
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 65 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Rainmakers		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address PO Box 1082		Amount of Each Disbursement this Period 1921.01 Transaction ID : SB17.41214
City Springfield	State VA	
Purpose of Disbursement Solicitation	Category/ Type 003	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Rainmakers		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address PO Box 1082		Amount of Each Disbursement this Period 2241.97 Transaction ID : SB17.41304
City Springfield	State VA	
Purpose of Disbursement Solicitation Commissions	Category/ Type 003	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Rainmakers		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2015
Mailing Address PO Box 1082		Amount of Each Disbursement this Period 1582.70 Transaction ID : SB17.41504
City Springfield	State VA	
Purpose of Disbursement Internet Fundraising	Category/ Type 003	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	5745.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Royal Lub		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 3523 S Broadway Ave		Amount of Each Disbursement this Period 72.45
City Tyler	State TX	
Purpose of Disbursement Oil Change	Category/ Type 002	Transaction ID : SB17.41374
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 2025 Loop 323 S SW		Amount of Each Disbursement this Period 75.19
City Tyler	State TX	
Purpose of Disbursement Bar B Q	Category/ Type 003	Transaction ID : SB17.41126
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 2025 Loop 323 S SW		Amount of Each Disbursement this Period 84.96
City Tyler	State TX	
Purpose of Disbursement Bar B Q	Category/ Type 003	Transaction ID : SB17.41206
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	232.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 2025 Loop 323 S SW		Amount of Each Disbursement this Period 146.23 Transaction ID : SB17.41232
City Tyler	State TX	
Zip Code 75702	Purpose of Disbursement Bar B Q	Category/ Type 003
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 2025 Loop 323 S SW		Amount of Each Disbursement this Period 431.90 Transaction ID : SB17.41322
City Tyler	State TX	
Zip Code 75702	Purpose of Disbursement Decorations	Category/ Type 003
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Shell Oil Dallas		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 424 S R L Thornton Fwy		Amount of Each Disbursement this Period 41.99 Transaction ID : SB17.41378
City Dallas	State TX	
Zip Code 75203	Purpose of Disbursement Gasoline	Category/ Type 002
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	620.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 81		
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 117.13 Transaction ID : SB17.41106
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 28.50 Transaction ID : SB17.41132
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.41217
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	160.63
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 69 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 110.54 Transaction ID : SB17.41234
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 28.50 Transaction ID : SB17.41241
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Southside Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.41331
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	154.04
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 70 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Southside Bank		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 132.41 Transaction ID : SB17.41342
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Southside Bank		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 28.50 Transaction ID : SB17.41355
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Southside Bank		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address P. O. Box 1079		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.41548
City Tyler	State TX	
Zip Code 75710	Purpose of Disbursement Service Charge	Category/ Type 001
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	175.91
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 71 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Storage Center South		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 13638 SH 110		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.41115
City Tyler	State TX	
Purpose of Disbursement Storage	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Storage Center South		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2015
Mailing Address 13638 SH 110		Amount of Each Disbursement this Period 105.00 Transaction ID : SB17.41141
City Tyler	State TX	
Purpose of Disbursement Storage	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Storage Center South		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 13638 SH 110		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.41200
City Tyler	State TX	
Purpose of Disbursement Storage	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	295.00
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 73 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Storage Center South		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2015
Mailing Address 13638 SH 110		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.41502
City Tyler	State TX	
Purpose of Disbursement Storage	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) B. Suddenlink		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address P O Box 139004		Amount of Each Disbursement this Period 100.05 Transaction ID : SB17.41112
City Tyler	State TX	
Purpose of Disbursement Cable TV	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

Full Name (Last, First, Middle Initial) c. Suddenlink		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2015
Mailing Address P O Box 139004		Amount of Each Disbursement this Period 99.75 Transaction ID : SB17.41181
City Tyler	State TX	
Purpose of Disbursement Cable TV	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TX	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	294.80
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 74 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Suddenlink		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015
Mailing Address P O Box 139004		Amount of Each Disbursement this Period 99.75 Transaction ID : SB17.41311
City Tyler	State TX	
Purpose of Disbursement Cable TV	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. Suddenlink		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address P O Box 139004		Amount of Each Disbursement this Period 99.75 Transaction ID : SB17.41474
City Tyler	State TX	
Purpose of Disbursement Cable TV	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. Trattoria Alberto		Date of Disbursement MM / DD / YYYY 04 / 29 / 2015
Mailing Address 1660 Crain Hwy		Amount of Each Disbursement this Period 442.07 Transaction ID : SB17.41210
City Glen Burnie	State MD	
Purpose of Disbursement Meeting	Category/ Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	641.57
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 75 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. United Air		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address P. O. Box 66100		Amount of Each Disbursement this Period 232.60 Transaction ID : SB17.41377
City Chicago State IL Zip Code 60666	Purpose of Disbursement Airline Tickets 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. United Air		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address P. O. Box 66100		Amount of Each Disbursement this Period 625.10 Transaction ID : SB17.41541
City Chicago State IL Zip Code 60666	Purpose of Disbursement Airline Ticket 002 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203		Amount of Each Disbursement this Period 332.75 Transaction ID : SB17.41123
City Austin State TX Zip Code 78701	Purpose of Disbursement On Line Donations 003 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1190.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203		Amount of Each Disbursement this Period 169.75 Transaction ID : SB17.41354
City Austin State TX Zip Code 78701	Purpose of Disbursement On Line Donations 003 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. U S House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2015
Mailing Address Longworth House office Bldg		Amount of Each Disbursement this Period 1106.20 Transaction ID : SB17.41253
City Washington State DC Zip Code 20515	Purpose of Disbursement Gifts for Supporters 003 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 180 Washington Valley Rd.		Amount of Each Disbursement this Period 402.88 Transaction ID : SB17.41114
City Bedminster State NJ Zip Code 07921	Purpose of Disbursement Telephone 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1678.88
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 77 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 180 Washington Valley Rd.		Amount of Each Disbursement this Period 326.25 Transaction ID : SB17.41201
City Bedminster State NJ Zip Code 07921	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 180 Washington Valley Rd.		Amount of Each Disbursement this Period 316.22 Transaction ID : SB17.41323
City Bedminster State NJ Zip Code 07921	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 180 Washington Valley Rd.		Amount of Each Disbursement this Period 411.76 Transaction ID : SB17.41507
City Bedminster State NJ Zip Code 07921	Purpose of Disbursement Telephone 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1054.23
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 78 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Kimberly Kay Willingham		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 3103 N Hampton Dr #903		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.41119
City Alexandria State VA Zip Code 22302	Purpose of Disbursement Salary - Part Time Employment Category/Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Kimberly Kay Willingham		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 3103 N Hampton Dr #903		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.41225
City Alexandria State VA Zip Code 22302	Purpose of Disbursement Salary - Part Time Employment Category/Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Kimberly Kay Willingham		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 3103 N Hampton Dr #903		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.41335
City Alexandria State VA Zip Code 22302	Purpose of Disbursement Salary Part Time Category/Type 001	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 81			
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Woodgate I		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 1121 E S Southeast Loop 323 Ste 200		Amount of Each Disbursement this Period 440.00 Transaction ID : SB17.41120
City Tyler State TX Zip Code 75701	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) B. Woodgate I		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 1121 E S Southeast Loop 323 Ste 200		Amount of Each Disbursement this Period 440.00 Transaction ID : SB17.41226
City Tyler State TX Zip Code 75701	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

Full Name (Last, First, Middle Initial) c. Woodgate I		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 1121 E S Southeast Loop 323 Ste 200		Amount of Each Disbursement this Period 440.00 Transaction ID : SB17.41336
City Tyler State TX Zip Code 75701	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1320.00
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 80 OF 81	
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. XM Satellite Radio		Date of Disbursement
Mailing Address 1500 Eckngnton PL NE		M M / D D / Y Y Y Y 06 / 03 / 2015
City Washington State DC Zip Code 20002	Purpose of Disbursement Satellit Radio	Amount of Each Disbursement this Period
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Category/ Type 001	135.20
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.41350
State: TX District: 01		

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

SUBTOTAL of Disbursements This Page (optional).....	135.20
TOTAL This Period (last page this line number only).....	60273.31

**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 81 OF 81
	<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)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) A. Kileen Volunteers		Date of Disbursement MM / DD / YYYY 04 / 10 / 2015
Mailing Address PO Box 1329		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.41156
City Killeen	State TX	
Zip Code 76540	Purpose of Disbursement Ft Hood Memorial	Category/ Type 012
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) B. MIKE FLYNN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address 212 N 6TH STREET		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.41401
City QUINCY	State IL	
Zip Code 62301	Purpose of Disbursement Donation	Category/ Type 011
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

Full Name (Last, First, Middle Initial) c. National Capital Texas A&M Club		Date of Disbursement MM / DD / YYYY 05 / 19 / 2015
Mailing Address 560 N Street Southwest Apt N507		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.41288
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name LOUIE GOHMERT FOR CONGRESS COMMITTEE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 01	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	3500.00