12030723000

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

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						U:			

FEC FORM 3 (Revised 02/2003)

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typinger the lines.	g, type	12FE4M5	- Pari	ER
<u>P</u>	HILL NORLLIS	5	NGLE	S _I S ; ; ;			 	
ADI	Check if different than previously reported. (ACC)	BILRMINE		6		ALL TS	52361-69	 i,5,6
2.	FEC IDENTIFICATION N	UMBER ▼	CITY			STATE A	ZIP CODE A □ STATE ▼ D	ISTRICT
	C005083	82 3.	IS THIS REPORT	(N) NEW	OR	AMENDÊD (A)	AL	Ø.7t
4.	TYPE OF REPORT (Ch (a) Quarterly Reports: April 15 Quarterly I	Report (Q1)	12-Day PRE	-Election Repo Primary (12P) Convention (1	[General (12G) Special (12S)	· Runoff	f (12R)
	July 15 Quarterly F October 15 Quarter January 31 Year-Er	rly Report (Q8)	Election on	T-Election Rep	D D D		in the State of	
	Termination Report		Election on	General (30G)	[Runoff (30R)	in the State of	al (30S)
5.	Covering Period	2 ′ 2 ° ′ ž	<u> </u>	through	۲ ۲	1/31/2	<u> </u>	
	ertify that I have examined the or Print Name of Treasure		best of my kn	owledge and b		true, correct and co	mplete.	
-	nature of Treasurer	- has				Date O.L.	25 Z	ΪŽ
NO	TE: Submission of false, erron	eous, or incomplete info	ormation may	subject the pers	son signing	this Report to the p	enalties of 2 U.S.C.	. §437g.

FE5AN018

Use Only

SUMMARY PAGE

of Receipts and Disbursements FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Report Covering the Period: From: **COLUMN A COLUMN B Election Cycle-to-Date This Period** Net Contributions (other than loans) **Total Contributions** (other than loans) (from Line 11(e)) (b) Total Contribution Refunds (from Line 20(d)) (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures Total Operating Expenditures (frem Line 17) (b) Total Offsets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

369805

For further information contact:

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

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

FEC Form 3 (Revised 12/2003)

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

PHIL NORRIS FOR CONGRESS

Report Covering the Period:

12030723002

From:

121/2011

To:

12/31/2

	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	granduringengurikunan, megamegrakén mampanaj	- Mark County and the office of suffering to the section of the se		
	(i) Itemized (use Schedule A)				
	(ii) Unitemized				
	(b) Political Party Committees				
	(d) The Candidate				
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
13.	LOANS: (a) Made or Guaranteed by the Candidate	3,698.05	3,698.05		
	(b) All Other Loans	3,69805	3,698.05		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		printed in the Antique recognition of the Constitution of the Cons		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)				
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	3,698.05	3,698,05		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period **Election 'Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES Service Committee of the Committee of th كالتباري بالصاب والتسام سيرم سيماسيام بالنزمان 19. LOAN REPAYMENTS: Great Committee Committee Florida Committee (Committee Committee Committee Committee Committee Committee Commit (a) Of Loans Made or Guaranteed The second secon by the Candidate..... indiania de la composición de la compo Composición de la composición del composición de la composición aan ka marangan laga laga laga laga ka marangan laga aliba. Marangan ka marangan (b) Of All Other Loans $\frac{(n+1)(n+1)(2p+1)(n+1)(2p+1)(2p+1)(n+1)(n+1)(2p+1)}{(n+1)(n+1)(2p+1)(2p+1)(2p+1)(2p+1)(2p+1)(2p+1)(2p+1)}$ TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... limit of the months are made that the media 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees Beering of the Society of the The state of the s (b) Political Party Committees..... Other Political Committees (such as PACs)..... g**e**ardientiae∕Neet arthaitheata rana da akiya magazari, nayayi da madamiran nabayini. (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... urthoughten ter tractor in the authorization the 21. OTHER DISBURSEMENTS and the first of the contraction 22. TOTAL DISBURSEMENTS <u>598.05</u> (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

SCHEDULI	EΑ	(FEC	Form	3)
ITEMIZED	REC	EIPTS	5	

SCHEDULE A (FEC Form 3)				GE OF	Z
·	Use separate schedule(s) for each category of the	(check only	<u></u>		
ITEMIZED RECEIPTS	Detailed Summary Page	11a	11b 11c	—	П.
Any information copied from such Reports and Statements m	nay not be sold or used by any n		13a 13b		l 15 utions
or for commercial purposes, other than using the name and	address of any political committee	e to solicit c	contributions from	such_commi	ttee.
NAME OF COMMITTEE (In Full)					
/ _					
Full Name (Last, First, Middle Initial)	2 Congress	T -			
A NORDIE, PHILLIP D.		Date of	f Receipt		
Mailing Address		1	7/1000//	٩٦٧٤٩	γ
City State	Zip Code	_ \	21	2011	
HOOVER AL	35216				
E of the second		1 .			
federal political committee.	508382	1	t of Each Receipt " चन्न्या≔्या		
Name of Employer Occupation		-	3,	4800) O
CABRGEA SCRVICES RAD	_	1.72%			
	ycle-to-Date)		
Other (specify)	3,480.00				
Full Name (Last, First, Middle Initial)		 			
B. NORRIS, PHILLIP D.		Date of	f Receipt		
Mailing Address		MUM	/ 0 0 /	7.04.04.01	y '7',
373 HERITAGE DR. State	Zip Code	12 23 2011			1 11 112.1
Hoover AL	35216				
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federal political committee.	508382	Amount of Each Receipt this Period			
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Receipt For: Election C	ycle-to-Date	7	1 .		
	351955				
Other (specify)	3,5,1,8,0,5	ł			
Full Name (Last, First, Middle Initial)		<u> </u>	;		
C. HOPPIS, PHILLIP D.		⊣	f Receipt		
Mailing Address 373 HERITAGE DR.		M M	26	201	Y .
City State	Zip Code	P. North		<u></u>	4.3
HOOLER AL	3.5216				
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federal political committee.	, 5, 6, 5, 6, 2		TO Each Neceipt		;; =-;;
Name of Employer Occupation	1		r Reinstalander in der Eine		
	ENGINEER	_			-
	ycle-to-Date				
Other (specify)	, 3,6 \ 8,0 S				
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SUBTOTAL of Receipts This Page (optional)			<u>, , , , , , 3,</u>	ه ۱۳۰۰), 5
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TOTAL This Period (last page this line number only)		U s fig	يهيبه فالباسيم الأباب		·**: : 'I

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	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2 OF 2
	y information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of	soliciting contributions
\rangle	NAME OF COMMITTEE (In Full)			•	
$oldsymbol{L}$	PHIL NORRIS FOR	2	ougless		
	Full Name (Last, First, Middle Initial)				
A.	NOORIS, PHILLIP D.			Date of Receipt	
	Mailing Address'] 12/27	/ Y Y Y Y
	373 HOLITAGE DR.	State	7'n Code	1 1 27	2011
	City		Zip Code		
	Horavel	<u> </u>	35216	_	
	FEC ID number of contributing federal political committee.	Coc	508382	Amount of Each Re	•
	Name of Employer	Occupation		┦ ,	, 45.00
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	Receipt For:	Clastica C	ycle-to-Date		
	Primary General	Election C	ycie-to-bate		
	Other (specify)		211305		
	Outer (specify)		, 3,6 6 3.0 5		
_	Full Name (Last, First, Middle Initial)				
_	-			Date of Receipt	
В.	Norths, Phulp b. Mailing Address			╡ :	,
				1 12 29	′ 2 Å Y Y
	373 HERITAGE DR.	State	Zip Code	- ' ' ' ' '	20 1 1
	Homer	KL	35216		
	FEC ID number of contributing			_	
	federal political committee.	$C \circ c$	508382	Amount of Each Re	ceipt this Period
	,				
	Name of Employer	Occupation	1	Γ,	, 35.00
	CABRELL SERVICES	RAS	EUGINEER		
	Receipt For:		ycle-to-Date	7	
	Primary General				
	Other (specify)		, 3,698.05		
			· ·		
	Full Name (Last, First, Middle Initial)			Date of Decision	
C.	Mailing Address			Date of Receipt	•
	Mailing Address			M M / D D	/ Y Y Y Y
	Clb.	Ctata	Zip Code	_	
	City	State	Zip Code		
			·· <u>·</u> ······	4	
	FEC ID number of contributing	С		Amount of Each Re	soint this Deviced
	federal political committee.	C		Amount of Each Ne	ceipi inis Penoa
	Name of Employer	Occupation	· 	-	
	нало от шпроуст	Scoupauoi	•	,	,
	Receipt For:	Flooties C	valo to Dato	4	
	Primary General	Election C	ycle-to-Date		
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	Unior (Specify)		, ,		

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

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

, 80.00 3,698.05

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF 2		
ITEMIZED DISBURSEMENTS	for each category of the	17 18 19a 19b		
	Detailed Summary Page	20a 20b 20c 21		
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a				
NAME OF COMMITTEE (In Full)	doross or any pointest committee	co to constituentialismon seem commuted.		
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	Dugless_			
Full Name (Last, First, Middle Initial)	-	Date of Disbursement		
A. ALABAMA REPUBLICAU PARTY	·	/ เพื่อได้ ผู้ / [[\vec{v} \vec{v} \vec{v} \vec{v} \vec{v}]]		
Mailing Address	246	12 21 2011		
City State	Zip Code	Amount of Each Disbursement this Period		
BIRMINGHAM A	35209	GER Unit preside Harrist to reper the state of the state		
Purpose of Disbursement	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
CANDIDATE FILING FEE		-		
PHILLIP NORRIS	Category/ Type			
Office Sought: House Disbursement For		· ·		
Senate Primary President Other (s	General Seciful			
State: District: 67	pooliy)			
Full Name (Last, First, Middle Initiai)				
В.		Date of Disbursement		
Mailing Address		123/2011		
14455 N. HAYBEN PA	Sure 226			
City State	Zip Code	Amount of Each Disbursement this Period		
SCOTTSDALE AZ Purpose of Disbursement	95260	38.05		
PURCHAGE URL FOR WER				
Candidate Name	Category			
PHILLIP NORRIS Office Sought: House Disbursement For	Type:	-		
Senate Primary	General			
President Other (s	pecify)	1		
State: A District: 07 Full Name (Last, First, Middle Initial)	<u> </u>	+		
C.	·	Date of Disbursement		
UNITED STATES POSTAL SE	SUICE			
Mailing Address 1809 RUECHASE AR.		[14 24 2011		
	p Code	Amount of Each Disbursement this Period		
Howel AL	35244-9998	Percentantian a run a pue de la l		
Purpose of Disbursement FOST DFFICE BOX REX	4.5.00			
Candidate Name	Category	· •		
PHILLIP NORRIS	Туре			
Office Sought: House Disbursement For Senate Primary	: General			
President Other (s		G A T		
State: AL District: 67	·			
		2 = 1 3 \ =		
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)		n. in la religion la line, religion de la place de la company de la comp		

SCHEDULE B (FEC Form 3)

OF Z FOR LINE NUMBER: PAGE 2 Use separate schedule(s) (check only one) for each category of the V17 ITEMIZED DISBURSEMENTS 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit centributions from such committee. NAME OF COMMITTEE (In Full) THIL HORRIS Full Name (Last, First, Middle Initial) Date of Disbursement ENVATO إبك بني من من حيا ١ [[عب ط]] و [إلا من إلا إلى من إلى الله Mailing Address City State Zip Code Amount of Each Disbursement this Period 8011 MELBONRUE VICTORIA Purpose of Disbursement 0,0,4 WEBSITE Candidate Name Category/ THILLIP NORRIS Type Office Sought: 4 House Disbursement For: 4Primary General Senate President Other (specify) District: 67 State: AL Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address Zip Code City State Amount of Each Disbursement this Period Purpose of Disbursement LICENSE DE L'ANDERS DE LA TACE LE Candidate Name Category/ Type Office Sought: Disbursement For: House Primary General Senate Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. / D D / Mailing Address City State Zip Code Amount of Each Disbursement this Period analan dikantan mamman memba Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

			PAGE \	OF \	
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	13a	
ME OF COMMITTEE (In Full)			1 1130	
PHIL NORRIS	5 FOR COURSESS		+6°.		
LOAN SOURCE Full Name	E (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	ection:		
1)-10:E 7	3 m. 1. A . K	· ' [Primary Géneral		
Mailing Address	PHLLIP D.		Other (specify)		
373 Her	TAKE XD	-			
City	State ZII	P Code			
HOOVER	AL	35216			
Original Amount of Loan	Cumulative Payme	nt To Date Balance	Outstanding at Close of	This Period	
la fila e la companya di sala e la companya	and the second second	TENTROPERCET CENTED - FILE FRANCE	ชาหร อก ระบา โดย ซาการแกร ฮ	entroport	
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TERMS Date Incurre	d Date	Due Interest Rate	Secur	red:	
	, , , , , , , , , , , , , , , , , , ,				
1 2 21 2	. 0.). (אַסָּאַב אָרַיּסאָר	5	es No	
List All Endorsers or Guar	rantors (if any) to Loan Source		, de		
1. Full Name (Last, First, I	Middle Initial)	Name of Employer			
Mailing Address		Occupation	::		
			, p		
City	State ZIP Code	Amount Guaranteed	Higher compression and	V- III	
Oity	State ZIF Code	Outstanding: the Demonstrate	er Deer Look Door Ere old or Andr	;**-, - <u>'</u>]	
2. Full Name (Last, First, M	liddle Initial)	Name of Employer			
Mailing Address		Occupation			
		<u>'</u>			
	715.0	Amount Guaranteed	HOTELS TO BUT OF	ngarij	
City	State ZIP Code	Outstanding:	السهدكونين التهاك المراتك با	الست.	
3. Full Name (Last, First, M	liddle Initial)	Name of Employer			
Mailing Address		Occupation			
Maining Address		Occupation	i i		
		Amount Transcript	andary partition to the the		
City	State ZIP Code	Guaranteed Outstanding:		11	
4. Full Name (Last, First, M	liddle Initial)	Name of Employer	1 2		
Mailing Address		Occupation			
Maining / Worlds		Cooupation			
				-, -;	
City	State ZIP Code	Guaranteed Outstanding:	and and instruction to a Constitution	:P- as l	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only).....

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

rederal Election Commission, Washington, D.C. 20463		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
PHIL NORLLIS FOR CO	n eless	C00508382
LENDING INSTITUTION (LENDER)	Amount of Loan	interest Rate (APR)
Full Name D/A	Amount of Loan	roman (m. proportiona)
Mailing Address	Date Incurred or Established	M
City N State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	M
B. If line of credit,	Outstanding	
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? st be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on depoeit, or other. No Yes If yes, specify:	f deposit, chattel papers,	t is the value of this collateral?
		s the lender have a perfected security est in it? No Yes
E. Are any ruture contributions or ruture receipts of interest collateral for the loan? No Yes If yes, s	pecify: Wha	at is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
M M / D D / Y Y Y Y Y	City, State, Zip:	· · · · · · · · · · · · · · · · · · ·
F. If neither of the types of collateral described above w exceed the loan amount, state the basis upon which		
G. COMMITTEE TREASURER		DATE
Typed Name Signature		MUM / DUD / YVY YVY
H. Attach a signed copy of the loan agreement.		
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the teare accurate as stated above. The loan was made on terms and conditions (incompliant extensions of credit to other borrowers of the institution is aware of the requirement that a complied with the requirements set forth at 11 C.	cluding interest rate) no more favoral f comparable credit worthiness. a loan must be made on a basis wh	ble at the time than those imposed for ich assures repayment, and has
AUTHORIZED REPRESENTATIVE	.11.	DATE
Typed Name Signature THS PAGE IS Titl	le	M . M / D . D / Y . Y . Y . Y

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
(check only one)

xcluding Loans			ered line)	(check only one)	9
NAME OF COMMITTEE (In Full)					
THIL NORRIS F	of Congles	s		·^	
A. Full Name (Last, First, Middle Initial) of Debtor o			Nature of D	ebt (Purpose):	
THIS PAGE IS NOT	ADDITIONS				
Mailing Address	MANDA				
City State	Zip Code			,	
Outstanding Balance Beginning This Period					
			٠.		
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close o	f This Perio
	TOTAL STOCK SUPPLIES TO GET THE PERM		}}		;
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B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		Nature of D	ebt.(Purpose):	
Mailing Address				·	
			• 1	1 1	
City State	Zip Code				
Outstanding Balance Beginning This Period		I.			
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Amount Incurred This Period	Payment This Period		Outstandii	ng Balance at Close o	of This Pario
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C. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of D	ebt (Purpose):	
Mailing Address		1		ų	
City	State Zip Code			B	
			·		
Outstanding Balance Beginning This Period		_		•	
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Amount Incurred This Period	Payment This Period	,		ng Balance at Close o	
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SUBTOTALS This Period This Page (optional)		>	<u> </u>	- <u>(3) </u>	nn
TOTALS This Period (last page this line number on	ıly)	>		-3	<u></u>
TOTAL OUTSTANDING LOANS from Schedule C	last page only)	>			
ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page o	only) ►	Įį.	en al en la companya de la company	7 a

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

•								
Nar	Name of Principal Campaign Committee (In Full) Report Covering Period: From: To:							
7	PHIL NORRIS FOR (12) 21 20 11 1) 21 31 12011							
	7745	Committee	Name	LICABLE	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees		
A								
П	Column Total Last Page C	Only		-				
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans		
	A .				i i			
[3				··	_		
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(I) Line No. 16 Total Receipts	(m) Line No. ¹ 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees		
	A							
\[\]	3							
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	. (r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees		
,	A							
	3				N			
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) 'a' Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee		
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	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures					
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(3/2005)

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