

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

ACTRIGHT

ADDRESS (number and street) ▼

2029 K STREET NW SUITE 300

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00488478

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer Brian S Brown

Signature of Treasurer

Brian S Brown

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ACTRIGHT

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		10746.43
(b) Cash on Hand at Beginning of Reporting Period.....	13410.03	
(c) Total Receipts (from Line 19)	9146.23	71744.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	22556.26	82490.60
7. Total Disbursements (from Line 31)	12263.28	72197.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10292.98	10292.98
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)	85271.16	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ACTRIGHT

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		16		2014

To:

M M	/	D D	/	Y Y Y Y
11		24		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8153.72

59478.72

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

8153.72

59478.72

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

8153.72

59478.72

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

992.51

9765.45

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

2500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

9146.23

71744.17

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

9146.23

71744.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2354.56	9757.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2354.56	9757.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9908.72	59424.72
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2915.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2915.00
29. Other Disbursements	0.00	100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12263.28	72197.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12263.28	72197.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8153.72	59478.72
34. Total Contribution Refunds (from Line 28(d))	0.00	2915.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8153.72	56563.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	2354.56	9757.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	992.51	9765.45
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1362.05	-7.55

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Eldridge Adelbert E.

Mailing Address 253 Bunker Rd.

City

Rotonda West

State

FL

Zip Code

33947

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.10609

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

B. Roth Allen

Mailing Address 255 Raymond Street

City

Rockville Centre

State

NY

Zip Code

11570

FEC ID number of contributing
federal political committee.

C

Name of Employer

RSL Mangement

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10563

Amount of Each Receipt this Period

250.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Blass Andreas

Mailing Address 1867 Evergreen Lane

City

Ypsilanti

State

MI

Zip Code

48198

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10553

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

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

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

375.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Wahrmond Barbara

Mailing Address 205 Hickory Bend Road

City

Brenham

State

TX

Zip Code

77833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blinn College

Occupation

teacher

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10615

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

B. Malin Ben

Mailing Address 6275 Peony Lane N

City

Maple Grove

State

MN

Zip Code

55311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Federal Reserve Bank of Minneapolis

Occupation

Economist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10530

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Conlon Bill

Mailing Address 184 Ontario Ave

City

Massapequa

State

NY

Zip Code

11758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Verizon Communications

Occupation

Sales Associate

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.10403

Amount of Each Receipt this Period

50.00

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

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

125.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Harken Bob

Mailing Address 286 W. Eagle Lake Drive

City State Zip Code
 Maple Grove MN 55369

FEC ID number of contributing
federal political committee.

C

Name of Employer
 TRIDIM FILTER CORP.

Occupation
 Sales Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11AI.10693

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Knianicky Bohdan

Mailing Address 4272 Merritt Blvd

City State Zip Code
 La Mesa CA 91941

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Obama s Plantation

Occupation
 Slave

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 24 / 2014

Transaction ID : SA11AI.10443

Amount of Each Receipt this Period

10.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

C. Bocchicchio Brian

Mailing Address 20618 Stanford Avenue

City State Zip Code
 Fairview Park OH 44126

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Philips Healthcare

Occupation
 Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 18 / 2014

Transaction ID : SA11AI.10411

Amount of Each Receipt this Period

50.00

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

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

65.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Brown Brian

Mailing Address 6463 Drexel Road

City

Philadelphia

State

PA

Zip Code

19151

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Organization for Marriage

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10629

Amount of Each Receipt this Period

100.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

B. Brown Brian

Mailing Address 6463 Drexel Road

City

Philadelphia

State

PA

Zip Code

19151

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Organization for Marriage

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10630

Amount of Each Receipt this Period

500.00

BELL FOR SENATE

Full Name (Last, First, Middle Initial)

C. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2.00

Date of Receipt

10 / 24 / 2014

Transaction ID : SA11AI.10453

Amount of Each Receipt this Period

2.00

Catholic Vote PAC

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

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

602.00

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

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 10 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.10464

Amount of Each Receipt this Period

1.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.10465

Amount of Each Receipt this Period

1.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10479

Amount of Each Receipt this Period

1.25

NOM VICTORY FUND

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

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

3.25

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10480

Amount of Each Receipt this Period

1.75

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2014

Transaction ID : SA11AI.10684

Amount of Each Receipt this Period

1.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

C. Killian Brian

Mailing Address 1234 somewhere

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2014

Transaction ID : SA11AI.10685

Amount of Each Receipt this Period

1.00

Ted Cruz for Senate

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

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

3.75

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Vogrinc Brian

Mailing Address 752 Creek Bluff Lane

City

Rockford

State

IL

Zip Code

61114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vogrinc

Occupation

recruiter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10498

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Berry Bryan

Mailing Address 354 N. Raynor Ave.

City

Joliet

State

IL

Zip Code

60435

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self/MetalPrices.com

Occupation

Writer/Journalist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10524

Amount of Each Receipt this Period

150.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Hendrickson Carol

Mailing Address 10358 Twin Brooks LN NW

City

Silverdale

State

WA

Zip Code

98383

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2014

Transaction ID : SA11AI.10463

Amount of Each Receipt this Period

25.00

NOM Federal PAC

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 13 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. gromowsky charles

Mailing Address 12404 horton st

City

overland park

State

KS

Zip Code

66209

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10573

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Chui Christopher

Mailing Address 3930 Rosemead Blvd., Apt i

City

Rosemead

State

CA

Zip Code

91770

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 08 / 2014

Transaction ID : SA11AI.10683

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Harris Christopher

Mailing Address 13744 Quarry Rd

City

Oberlin

State

OH

Zip Code

44074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11AI.10670

Amount of Each Receipt this Period

5.00

CORY GARDNER FOR SENATE

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

40.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Harris Christopher

Mailing Address 13744 Quarry Rd

City

Oberlin

State

OH

Zip Code

44074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10671

Amount of Each Receipt this Period

5.00

SULLIVAN FOR US SENATE

Full Name (Last, First, Middle Initial)

B. Harris Christopher

Mailing Address 13744 Quarry Rd

City

Oberlin

State

OH

Zip Code

44074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10672

Amount of Each Receipt this Period

5.00

JONI ERNST FOR US SENATE INC

Full Name (Last, First, Middle Initial)

C. Harris Christopher

Mailing Address 13744 Quarry Rd

City

Oberlin

State

OH

Zip Code

44074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10673

Amount of Each Receipt this Period

5.00

COTTON FOR SENATE

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 15 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Fabeny Colin

Mailing Address 10902 Back Ridge Rd

City State Zip Code
 Charlotte NC 28277

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 24 2014

Transaction ID : SA11AI.10441

Amount of Each Receipt this Period

50.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

B. Fabeny Colin

Mailing Address 10902 Back Ridge Rd

City State Zip Code
 Charlotte NC 28277

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 29 2014

Transaction ID : SA11AI.10533

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Carlson Dan

Mailing Address 1011 County Road 695

City State Zip Code
 Alvin TX 77511

FEC ID number of contributing federal political committee.

C

Name of Employer

Core Lab

Occupation

chemist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 16 2014

Transaction ID : SA11AI.10395

Amount of Each Receipt this Period

10.00

BEN SASSE FOR SENATE INC

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

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

160.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Carlson Dan

Mailing Address 1011 County Road 695

City State Zip Code
 Alvin TX 77511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Core Lab

chemist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.10396

Amount of Each Receipt this Period

10.00

CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

B. Carlson Dan

Mailing Address 1011 County Road 695

City State Zip Code
 Alvin TX 77511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Core Lab

chemist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.10397

Amount of Each Receipt this Period

10.00

JONI ERNST FOR US SENATE INC

Full Name (Last, First, Middle Initial)

C. Carlson Dan

Mailing Address 1011 County Road 695

City State Zip Code
 Alvin TX 77511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Core Lab

chemist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.10398

Amount of Each Receipt this Period

10.00

FRIENDS OF COL ROB MANESS

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

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

30.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Carlson Dan

Mailing Address 1011 County Road 695

City State Zip Code
 Alvin TX 77511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Core Lab

chemist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11AI.10399

Amount of Each Receipt this Period

10.00

COTTON FOR SENATE

Full Name (Last, First, Middle Initial)

B. Christoffers Daniel

Mailing Address 3433 Transit Avenue

City State Zip Code
 Sioux City IA 51106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

City of Sergeant Bluff

Clerical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10565

Amount of Each Receipt this Period

10.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Phair Daniel D

Mailing Address 214 Russell Street

City State Zip Code
 Islamorada FL 33036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Guess

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

11 / 08 / 2014

Transaction ID : SA11AI.10681

Amount of Each Receipt this Period

10.00

VIGOP

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

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

30.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Ramirez Danilo

Mailing Address 28W525 Diversey Parkway

City State Zip Code
 Chicago IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Developer

Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.00

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11AI.10691

Amount of Each Receipt this Period

1.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

B. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
 WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10663

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

C. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
 WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10664

Amount of Each Receipt this Period

1.00

BELL FOR SENATE

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

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

3.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10665

Amount of Each Receipt this Period

1.00

Louie Gohmert

Full Name (Last, First, Middle Initial)

B. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10666

Amount of Each Receipt this Period

1.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

C. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10667

Amount of Each Receipt this Period

1.00

THOM TILLIS COMMITTEE

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

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

3.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Rafie Darian

Mailing Address 28W525 Diversey Parkway

City State Zip Code
 WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6.00

Date of Receipt

11 / 03 / 2014

Transaction ID : SA11AI.10668

Amount of Each Receipt this Period

1.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

B. Kruse David

Mailing Address 8117 Brasstown Drive

City State Zip Code
 McKinney TX 75070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10484

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

C. TSIGAS DEMETRIOS K

Mailing Address 1020 Worthington Spring Drive

City State Zip Code
 Melbourne FL 32940

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Katherine Greek Orthodox Church

Occupation
Priest

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 24 / 2014

Transaction ID : SA11AI.10445

Amount of Each Receipt this Period

100.00

NOM Federal PAC

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

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

126.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Walker Don

Mailing Address 604 Hansen Avenue

City

Las Cruces

State

NM

Zip Code

88005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.10589

Amount of Each Receipt this Period

10.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Gordon Donald

Mailing Address 278 Connecticut Blvd.

City

Oakdale

State

CT

Zip Code

06370

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10514

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Mason Earl

Mailing Address 1307 enclave drive

City

Rockledge

State

FL

Zip Code

32955

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10472

Amount of Each Receipt this Period

25.00

VIGOP

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

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

85.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Gehringer Edward

Mailing Address 929 Pirouette Ct.

City Raleigh State NC Zip Code 27606

FEC ID number of contributing federal political committee.

C

Name of Employer
North Carolina State U.

Occupation
Computer scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10520

Amount of Each Receipt this Period

75.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Brinton Eliot

Mailing Address 420 Chipeta Way, Room 1160

City Salt Lake City State UT Zip Code 84108

FEC ID number of contributing federal political committee.

C

Name of Employer
self

Occupation
research physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10496

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Oliver Ellen

Mailing Address 76 Town Pump Circle

City Spencerport State NY Zip Code 14559

FEC ID number of contributing federal political committee.

C

Name of Employer
Ortho Clinical Diagnostics

Occupation
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10605

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 23 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Powers Ellen

Mailing Address 230 Aptos Heights

City State Zip Code
Aptos CA 95003

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

domestic management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2014

Transaction ID : SA11AI.10461

Amount of Each Receipt this Period

100.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

B. Becker Eloise

Mailing Address 6450 Ojibway Path

City State Zip Code
Lino Lakes MN 55014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10528

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Biesinger Emily

Mailing Address 49 Flowerbud

City State Zip Code
Irvine CA 92603

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.10613

Amount of Each Receipt this Period

50.00

NOM Federal PAC

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

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

175.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Baldock Gary

Mailing Address 7686 PASATIEMPO DR

City
Frisco

State
TX

Zip Code
75034

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10490

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Coats Gary

Mailing Address 1816 Lake Side

City
Plano

State
TX

Zip Code
75023

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.10646

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Kolkhorst Gary

Mailing Address 9977 W Sam Houston Pkwy N Ste 150

City
Houston

State
TX

Zip Code
77064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kolkhorst

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10492

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

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

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

225.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Scarzafava Gary

Mailing Address 12405 Schoolhouse St

City Raleigh State NC Zip Code 27614

FEC ID number of contributing federal political committee.

C

Name of Employer

NC State University

Occupation

Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10579

Amount of Each Receipt this Period

100.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Potts Gerald

Mailing Address 102 Trombay Dr

City Wilmington State NC Zip Code 28412

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10607

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Ramos Gilbert

Mailing Address 12739 Tehama Circle

City Riverside State CA Zip Code 92503

FEC ID number of contributing federal political committee.

C

Name of Employer

County of Riverside

Occupation

Drafter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

11 / 02 / 2014

Transaction ID : SA11AI.10661

Amount of Each Receipt this Period

25.00

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 26 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Donner Gregory

Mailing Address 60300 Pembroke Lane

City State Zip Code
 Elkhart IN 46517

FEC ID number of contributing
federal political committee.

C

Name of Employer

SonSet Solutions

Occupation

Engineering Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.10447

Amount of Each Receipt this Period

30.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

B. Avila Henry

Mailing Address 13616 Brandi Court

City State Zip Code
 Willis TX 77378

FEC ID number of contributing
federal political committee.

C

Name of Employer

ExxonMobil

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.10617

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Koopman Henry

Mailing Address 815-5th Avenue S

City State Zip Code
 Waite Park MN 56387

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10467

Amount of Each Receipt this Period

25.00

NOM Federal PAC

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

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

105.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Burns Jack

Mailing Address 740 Anns Way

City State Zip Code
 Vista CA 92083

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 05 / 2014

Transaction ID : SA11AI.10679

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

B. Abney James

Mailing Address 27995 S Elisha Road

City State Zip Code
 Canby OR 97013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Amtrak (retired 2006)

Locomotive Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : SA11AI.10687

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Bartlett James

Mailing Address 5423 39th Ave SE

City State Zip Code
 Lacey WA 98503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10545

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

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

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

65.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Evans James H

Mailing Address 514 E Carson Dr

City

Tempe

State

AZ

Zip Code

85282

FEC ID number of contributing
federal political committee.

C

Name of Employer

US Air Force

Occupation

Retired pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.10401

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. VON SPIEGEL JANICE

Mailing Address 202 MINEOLA AVE

City

AKRON

State

OH

Zip Code

44313

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIVERSITY OF AKRON

Occupation

LECTURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

11 / 02 / 2014

Transaction ID : SA11AI.10659

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

c. Long Jeff

Mailing Address 105 St. Charles Pl.

City

Tullahoma

State

TN

Zip Code

37388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Dish washer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10581

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

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

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

100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Butzke Jeffrey

Mailing Address 8536 Bellagio Drive

City

Naples

State

FL

Zip Code

34114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asdvanage, Inc.

Occupation

Small Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.10409

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. SANVI JENNY

Mailing Address 5564 MARK CT SE

City

SALEM

State

OR

Zip Code

97317

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

RETIRED SPEECH PATHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10593

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Turco Maglio Jeryl

Mailing Address 6 Vizcaya Court

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

health care administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 25 / 2014

Transaction ID : SA11AI.10457

Amount of Each Receipt this Period

50.00

NOM Federal PAC

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

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

600.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Flood Jill

Mailing Address 4615 Deer Lake Rd.

City
Clinton

State
WA

Zip Code
98236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired School Nurse

Occupation

School Nurse RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10537

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. hooper jim

Mailing Address pobox548

City
fontana

State
CA

Zip Code
92334

FEC ID number of contributing
federal political committee.

C

Name of Employer

amer bolt

Occupation

sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 20 / 2014

Transaction ID : SA11AI.10415

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Krauss Jim

Mailing Address 4810 Hill St.

City
La Canada

State
CA

Zip Code
91011

FEC ID number of contributing
federal political committee.

C

Name of Employer

BVI

Occupation

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11AI.10639

Amount of Each Receipt this Period

200.00

CORY GARDNER FOR SENATE

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

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

250.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Krauss Jim

Mailing Address 4810 Hill St.

City

La Canada

State

CA

Zip Code

91011

FEC ID number of contributing
federal political committee.

C

Name of Employer

BVI

Occupation

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11AI.10640

Amount of Each Receipt this Period

200.00

JONI ERNST FOR US SENATE INC

Full Name (Last, First, Middle Initial)

B. Krauss Jim

Mailing Address 4810 Hill St.

City

La Canada

State

CA

Zip Code

91011

FEC ID number of contributing
federal political committee.

C

Name of Employer

BVI

Occupation

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11AI.10641

Amount of Each Receipt this Period

100.00

THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)

C. Krauss Jim

Mailing Address 4810 Hill St.

City

La Canada

State

CA

Zip Code

91011

FEC ID number of contributing
federal political committee.

C

Name of Employer

BVI

Occupation

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11AI.10642

Amount of Each Receipt this Period

200.00

COTTON FOR SENATE

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

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

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Fuller Jo-Ann

Mailing Address 8609 Reindeer Moss Dr

City
Wake Forest

State Zip Code
NC 27587

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homeschooler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10603

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Moon Joan

Mailing Address 230 Bethany Road #208

City
Burbank

State Zip Code
CA 91504

FEC ID number of contributing
federal political committee.

C

Name of Employer

USAO

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

11 / 04 / 2014

Transaction ID : SA11AI.10675

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Nickander Joan

Mailing Address 306 Baywood Court

City
Noblesville

State Zip Code
IN 46062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10621

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

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

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

110.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Bates Joanne

Mailing Address 16644 NW Paisley Dr

City
Beaverton

State
OR

Zip Code
97006

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10561

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Otis John

Mailing Address 2719 Chicago St.

City
Dickinson

State
TX

Zip Code
77539

FEC ID number of contributing
federal political committee.

C

Name of Employer

RB

Occupation

manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10623

Amount of Each Receipt this Period

10.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Wakelin John

Mailing Address 12827 Rockwell Ct

City
Poway

State
CA

Zip Code
92064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leidos

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10476

Amount of Each Receipt this Period

200.00

Catholic Vote PAC

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

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

260.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Picou Jon

Mailing Address 3850 N Causeway Blvd Suite 1100

City State Zip Code
 Metairie LA 70002

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10571

Amount of Each Receipt this Period

100.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Cosby Josephine

Mailing Address 18 Vernon Rd

City State Zip Code
 MEDWAY MA 02053

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10625

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Mercer Joshua

Mailing Address 140 Budlong St

City State Zip Code
 Hillsdale MI 49242

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 24 / 2014

Transaction ID : SA11AI.10455

Amount of Each Receipt this Period

100.00

Catholic Vote PAC

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 35 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Brant Judith

Mailing Address 1526 Golf View Rd Unit G

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing
federal political committee.

C

Name of Employer

WI Family Action

Occupation

Office Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10518

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. mershon judith

Mailing Address 10654 Ayers Ave

City

los angeles

State

CA

Zip Code

90064

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.10422

Amount of Each Receipt this Period

500.00

KIRK JORGENSEN FOR CONGRESS

Full Name (Last, First, Middle Initial)

C. Pawlaczyk Karen

Mailing Address 401 Sycamore Lane

City

Waterville

State

OH

Zip Code

43566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Perrysburg Exempted Village Schoos

Occupation

Monitor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : SA11AI.10644

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

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

650.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. McAllister Kathleen

Mailing Address 304 W 75 St

City
New York

State Zip Code
NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10482

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

B. mcmichael kathryn

Mailing Address 4121 Lorene drive unit 302

City
estero

State Zip Code
FL 33928

FEC ID number of contributing
federal political committee.

C

Name of Employer

At one time worked for Jeff bell for S

Occupation

retired from politics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.10431

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Schoonmaker Kevin

Mailing Address 455 Sunnybrook Lane

City
Wheaton

State Zip Code
IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wheaton College

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.10636

Amount of Each Receipt this Period

25.00

JONI ERNST FOR US SENATE INC

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

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

85.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Schoonmaker Kevin

Mailing Address 455 Sunnybrook Lane

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wheaton College

Occupation

Computer Programmer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10637

Amount of Each Receipt this Period

25.00

THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)

B. Schoonmaker Kevin

Mailing Address 455 Sunnybrook Lane

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wheaton College

Occupation

Computer Programmer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

75.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.10694

Amount of Each Receipt this Period

25.00

WILLIAM CASSIDY

Full Name (Last, First, Middle Initial)

C. Dewsnap Kristi

Mailing Address 3640 Sage View Lane

City

Kimberly

State

ID

Zip Code

83341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10494

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

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

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

100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Zitkus Kristi

Mailing Address 8961 E. Seneca St.

City State Zip Code
Tucson AZ 85715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

na

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10516

Amount of Each Receipt this Period

10.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Hilliard Larry

Mailing Address 3803 Belhaven Drive

City State Zip Code
Greensboro NC 27407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

retired

eliminating liars and thieves

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2014

Transaction ID : SA11AI.10677

Amount of Each Receipt this Period

100.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Stikeleather Larry

Mailing Address 5713 Baird Dr.

City State Zip Code
Raleigh NC 27606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NC State Univ.

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10547

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 39 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Smith Lawson

Mailing Address 171 Kunkels Dahl Road

City
Kempston

State Zip Code
PA 19529

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kempston New Church

Occupation
teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10567

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Moses Leonard

Mailing Address 105 eagle head drive

City
Fort Washington

State Zip Code
MD 20744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prince Georges County

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10502

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Armstrong Lester

Mailing Address 11338 CLOUDCREST DR

City
SAN DIEGO

State Zip Code
CA 92127

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
Army

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10526

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

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

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

100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Granzow Linda

Mailing Address 2828 Foxfire Rd.

City
Charlotte

State
NC

Zip Code
28270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ncompass Business Solutions

Occupation

Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10506

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Orr Lynn

Mailing Address 1820 McPherson Ave

City

Richland

State

WA

Zip Code

99354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10585

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Bryant Lynwood

Mailing Address 4241 Arbr Gate St

City

Fort Worth

State

TX

Zip Code

76133

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired Military Aerospace Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.10405

Amount of Each Receipt this Period

15.00

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 41 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Sibal Marianne

Mailing Address 13241 Osterport Drive

City State Zip Code
Silver Spring MD 20906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montgomery County Public Schools

Occupation
Librarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11Al.10577

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. hancock mark

Mailing Address 3910 cindy court

City State Zip Code
indian head MD 20640

FEC ID number of contributing
federal political committee.

C

Name of Employer
navy

Occupation
pm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11Al.10619

Amount of Each Receipt this Period

42.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Haas Mary

Mailing Address 6371 Sherwood Road

City State Zip Code
Philadelphia PA 19151

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Org for Marriage

Occupation
Dir of Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11Al.10488

Amount of Each Receipt this Period

10.00

NOM VICTORY FUND

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

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

77.00

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

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

FOR LINE NUMBER: PAGE 42 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Shivanandan Mary

Mailing Address 4711 Overbrook Road

City State Zip Code
 Bethesda MD 20816

FEC ID number of contributing federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 29 2014

Transaction ID : SA11AI.10555

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Cole Mary A.

Mailing Address 131 Tenbury Rd.

City State Zip Code
 Lutherville MD 21093

FEC ID number of contributing federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 29 2014

Transaction ID : SA11AI.10569

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

c. Helget Maryann Helget

Mailing Address 7520 Elliot Avenue South

City State Zip Code
 Richfield MN 55423

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 14 2014

Transaction ID : SA11AI.10689

Amount of Each Receipt this Period

5.00

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

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

55.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Miranda Mary Beth

Mailing Address 208 Sylvan Grove Dr.

City State Zip Code
 Carya NC 27518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Syngenta

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11AI.10532

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. McTeague Maryellen

Mailing Address 3000 Valley Forge Circle Apt 646

City State Zip Code
 King of Prussia PA 19406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10595

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Williams Matthew

Mailing Address 3738 Tail Wind Dr

City State Zip Code
 Colorado Springs CO 80911

FEC ID number of contributing
federal political committee.

C

Name of Employer

NA

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 31 / 2014

Transaction ID : SA11AI.10627

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 44 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Rose Maureen

Mailing Address P.O. Box 1242

City State Zip Code
 Idyllwild CA 92549

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.10599

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Barry Michael

Mailing Address 1089 East Gartner

City State Zip Code
 Naperville IL 60540

FEC ID number of contributing federal political committee.

C

Name of Employer

EY

Occupation

Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 02 / 2014

Transaction ID : SA11AI.10650

Amount of Each Receipt this Period

20.00

CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

C. Barry Michael

Mailing Address 1089 East Gartner

City State Zip Code
 Naperville IL 60540

FEC ID number of contributing federal political committee.

C

Name of Employer

EY

Occupation

Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 02 / 2014

Transaction ID : SA11AI.10651

Amount of Each Receipt this Period

40.00

JONI ERNST FOR US SENATE INC

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

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

110.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11AI.10652

Amount of Each Receipt this Period

20.00

COTTON FOR SENATE

Full Name (Last, First, Middle Initial)

B. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11AI.10653

Amount of Each Receipt this Period

20.00

SULLIVAN FOR US SENATE

Full Name (Last, First, Middle Initial)

C. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2014

Transaction ID : SA11AI.10654

Amount of Each Receipt this Period

10.00

FRIENDS OF DAVE BRAT

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

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

50.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

155.00

Date of Receipt

11 / 02 / 2014

Transaction ID : SA11AI.10655

Amount of Each Receipt this Period

45.00

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

B. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

11 / 02 / 2014

Transaction ID : SA11AI.10656

Amount of Each Receipt this Period

20.00

KING FOR CONGRESS

Full Name (Last, First, Middle Initial)

C. Barry Michael

Mailing Address 1089 East Gartner

City
Naperville

State Zip Code
IL 60540

FEC ID number of contributing
federal political committee.

C

Name of Employer

EY

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

11 / 02 / 2014

Transaction ID : SA11AI.10657

Amount of Each Receipt this Period

20.00

THOM TILLIS COMMITTEE

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

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

85.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 47 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Bezruchka Michael

Mailing Address 21310 Poplar Way

City State Zip Code
 Brier WA 98036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Seeking job

Landscape Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.10634

Amount of Each Receipt this Period

5.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Boyce Michael

Mailing Address 572 Alida Drive

City State Zip Code
 Cary IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SS Peter & Paul Church

Deacon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10575

Amount of Each Receipt this Period

50.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Connolly Michael

Mailing Address 447 Peter Court

City State Zip Code
 Fairfield CT 06824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IBM

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10549

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

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

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

80.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Granahan Michael

Mailing Address 54 Tamarack Road

City

Andover

State

NJ

Zip Code

07821

FEC ID number of contributing
federal political committee.

C

Name of Employer

unemployed

Occupation

unemployed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 17 / 2014

Transaction ID : SA11AI.10407

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Linford Michael

Mailing Address 4010 San Antonio Rd

City

Yorba Linda

State

CA

Zip Code

92886

FEC ID number of contributing
federal political committee.

C

Name of Employer

self employed

Occupation

self employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 22 / 2014

Transaction ID : SA11AI.10429

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Deering Michele

Mailing Address 2918 Bass St

City

Anchorage

State

AK

Zip Code

99507

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.10601

Amount of Each Receipt this Period

20.00

Catholic Vote PAC

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 49 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Gremore Pam

Mailing Address 1206 E. Abrams Rd

City State Zip Code
 Bloomfield IN 47424

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAIC

Occupation

DMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10478

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Feagles Patricia

Mailing Address 6524 Rt 97

City State Zip Code
 Narrowsburg NY 12764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10486

Amount of Each Receipt this Period

15.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Nalitz Patricia

Mailing Address 525 Deer Creek Drive

City State Zip Code
 Cape Carteret NC 28584

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10557

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

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

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

65.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Waid Phil

Mailing Address 3400 Darbyshire Drive

City State Zip Code
Hilliard OH 43026

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11AI.10449

Amount of Each Receipt this Period

100.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

B. Platt Philip

Mailing Address 5269 Monarch Crest Way

City State Zip Code
Colorado Springs CO 80924

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.10424

Amount of Each Receipt this Period

25.00

CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

C. Platt Philip

Mailing Address 5269 Monarch Crest Way

City State Zip Code
Colorado Springs CO 80924

FEC ID number of contributing
federal political committee.

C

Name of Employer
USAF

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.10425

Amount of Each Receipt this Period

20.00

JONI ERNST FOR US SENATE INC

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 51 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Platt Philip

Mailing Address 5269 Monarch Crest Way

City State Zip Code
 Colorado Springs CO 80924

FEC ID number of contributing
federal political committee.

C

Name of Employer

USAF

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.10426

Amount of Each Receipt this Period

25.00

THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)

B. Platt Philip

Mailing Address 5269 Monarch Crest Way

City State Zip Code
 Colorado Springs CO 80924

FEC ID number of contributing
federal political committee.

C

Name of Employer

USAF

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.10427

Amount of Each Receipt this Period

20.00

COTTON FOR SENATE

Full Name (Last, First, Middle Initial)

C. Richardson Reece and Lorene

Mailing Address 69765 Goodrich Rd.

City State Zip Code
 Sisters OR 97759

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10541

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

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

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

70.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Peterson Richard

Mailing Address 6354 Rancho Mission Road

City State Zip Code
 San Diego CA 92108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Navy

Occupation

Human Resources Asst.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.10611

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

B. James Ritchie

Mailing Address 2506 46th Street Apt A

City State Zip Code
 Los Alamos NM 87544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Emeritus Attorney [GA]

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.72

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.10632

Amount of Each Receipt this Period

20.72

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Flynn Robert

Mailing Address 501 Lanning Ct.

City State Zip Code
 Florham Park NJ 07932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paterson Public Schools

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.10417

Amount of Each Receipt this Period

50.00

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

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

80.72

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Maistros Robert

Mailing Address 11025 Greenline Court

City State Zip Code
 Mechanicsville VA 23116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.10512

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Sanford Robert

Mailing Address 233 Cone Dr.

City State Zip Code
 Selma AL 36701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.10543

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Schutt Ronda

Mailing Address 122 Henry Road

City State Zip Code
 Barto PA 19504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NA

homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.10451

Amount of Each Receipt this Period

100.00

NOM Federal PAC

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

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

225.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Dancause Rosalie

Mailing Address 4101 Eby Drive

City State Zip Code
Dumfries VA 22026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10508

Amount of Each Receipt this Period

5.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Hayes Russell

Mailing Address 577 Fiero Drive

City State Zip Code
Manteca CA 95337

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10504

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Hernandez Shannon

Mailing Address 6825 Poplar Pike

City State Zip Code
Memphis TN 38119

FEC ID number of contributing
federal political committee.

C

Name of Employer

First Horizon National Corporation

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10559

Amount of Each Receipt this Period

10.00

NOM VICTORY FUND

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

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

40.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Brown Sidney R

Mailing Address 2402 Chastain Dr, NE

City State Zip Code
 Atlanta GA 30342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jones Day

Occupation

Attorney at Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 20 / 2014

Transaction ID : SA11AI.10419

Amount of Each Receipt this Period

50.00

THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)

B. Brown Sidney R

Mailing Address 2402 Chastain Dr, NE

City State Zip Code
 Atlanta GA 30342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jones Day

Occupation

Attorney at Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 20 / 2014

Transaction ID : SA11AI.10420

Amount of Each Receipt this Period

50.00

COTTON FOR SENATE

Full Name (Last, First, Middle Initial)

C. frierson stacie

Mailing Address 7421 surrey pine drive

City State Zip Code
 Apollo beach FL 33572

FEC ID number of contributing
federal political committee.

C

Name of Employer

sta

Occupation

sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10510

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

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

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

150.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 56 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Litak Steven

Mailing Address 9754 S. Albany

City

Evergreen Park

State

IL

Zip Code

60805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bankers Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2014

Transaction ID : SA11AI.10459

Amount of Each Receipt this Period

25.00

NOM Federal PAC

Full Name (Last, First, Middle Initial)

B. Mesler Susan

Mailing Address 4610 N Darien Dr

City

Tacoma

State

WA

Zip Code

98407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.10500

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

C. Berg Theodora

Mailing Address 301 Michigan Rd

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11AI.10413

Amount of Each Receipt this Period

100.00

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

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

225.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Mullins Thomas

Mailing Address 103 Newcastle Ct

City
Galloway

State
NJ

Zip Code
08205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.10591

Amount of Each Receipt this Period

10.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

B. Strelchun Thomas

Mailing Address 5925 Ricky Ridge Trail

City
Orefield

State
PA

Zip Code
18069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Infinera

Occupation

Eng Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10587

Amount of Each Receipt this Period

25.00

Catholic Vote PAC

Full Name (Last, First, Middle Initial)

C. Villamana Thomas

Mailing Address 151 Devon Road

City
Bronxville

State
NY

Zip Code
10708

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.10597

Amount of Each Receipt this Period

25.00

VIGOP

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

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

60.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Wallgren Thomas

Mailing Address 1504 Price Drive

City State Zip Code
 cape girardeau MO 63701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trinity Lutheran School

Occupation

Mathematics Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11Al.10535

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. Williams Thomas

Mailing Address 300 Overland Dr

City State Zip Code
 McKinney TX 75069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11Al.10474

Amount of Each Receipt this Period

25.00

VIGOP

Full Name (Last, First, Middle Initial)

C. Bergsma Timothy

Mailing Address 14261, W Prevail Dr

City State Zip Code
 Carmel IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

unemployed

Occupation

research scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

11 / 01 / 2014

Transaction ID : SA11Al.10648

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

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

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

100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Unruh Troy and Donna

Mailing Address 404 Stirling Road

City

Rhome

State

TX

Zip Code

76078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

REtired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11Al.10551

Amount of Each Receipt this Period

50.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B. meyerer wendell

Mailing Address 560 whisperwood dr

City

longwood

State

FL

Zip Code

32779

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11Al.10583

Amount of Each Receipt this Period

10.00

VIGOP

Full Name (Last, First, Middle Initial)

C. dillinger william

Mailing Address 8310 cherry

City

kansas city

State

MO

Zip Code

64131

FEC ID number of contributing
federal political committee.

C

Name of Employer

ibm

Occupation

computer scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11Al.10539

Amount of Each Receipt this Period

100.00

NOM VICTORY FUND

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

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

160.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.10433

Amount of Each Receipt this Period

20.00

CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

B. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.10434

Amount of Each Receipt this Period

15.00

SULLIVAN FOR US SENATE

Full Name (Last, First, Middle Initial)

C. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.10435

Amount of Each Receipt this Period

10.00

BELL FOR SENATE

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 61 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 23 2014

Transaction ID : SA11AI.10436

Amount of Each Receipt this Period

25.00

JONI ERNST FOR US SENATE INC

Full Name (Last, First, Middle Initial)

B. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 23 2014

Transaction ID : SA11AI.10437

Amount of Each Receipt this Period

15.00

THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)

C. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 23 2014

Transaction ID : SA11AI.10438

Amount of Each Receipt this Period

15.00

COTTON FOR SENATE

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

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

55.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 140

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. Mas William

Mailing Address 8121 San Dimas Circle

City State Zip Code
 Buena Park CA 90620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mas Classics

Occupation

self employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

10 / 23 / 2014

Transaction ID : SA11AI.10439

Amount of Each Receipt this Period

25.00

MARTHA E MS. MCSALLY

Full Name (Last, First, Middle Initial)

B. Moran William

Mailing Address 440 Heatherton Court

City State Zip Code
 DeBary FL 32713

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10469

Amount of Each Receipt this Period

50.00

CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

C. Moran William

Mailing Address 440 Heatherton Court

City State Zip Code
 DeBary FL 32713

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

10 / 28 / 2014

Transaction ID : SA11AI.10470

Amount of Each Receipt this Period

25.00

COTTON FOR SENATE

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 63 OF 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. McCann William R

Mailing Address 1754 Quarry LN

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Software Developer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.10522

Amount of Each Receipt this Period

25.00

NOM VICTORY FUND

Full Name (Last, First, Middle Initial)

B.

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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) ▼

Aggregate Year-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)..... ►

25.00

8153.72

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

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

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 140

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. BELL FOR SENATE

Mailing Address PO BOX 31

City

PALISADES PARK

State

NJ

Zip Code

07650

FEC ID number of contributing
federal political committee.

C

C00558122

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA15.10351

Amount of Each Receipt this Period

110.00

Processing fee

Full Name (Last, First, Middle Initial)

B. BELL FOR SENATE

Mailing Address PO BOX 31

City

PALISADES PARK

State

NJ

Zip Code

07650

FEC ID number of contributing
federal political committee.

C

C00558122

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

638.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA15.10332

Amount of Each Receipt this Period

30.00

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

C. BELL FOR SENATE

Mailing Address PO BOX 31

City

PALISADES PARK

State

NJ

Zip Code

07650

FEC ID number of contributing
federal political committee.

C

C00558122

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

641.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA15.10326

Amount of Each Receipt this Period

3.00

Processing and fundraising fee

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

143.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 140

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. BELL FOR SENATE

Mailing Address PO BOX 31

City

PALISADES PARK

State

NJ

Zip Code

07650

FEC ID number of contributing
federal political committee.

C

C00558122

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

791.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2014

Transaction ID : SA15.10376

Amount of Each Receipt this Period

150.00

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

B. BEN SASSE FOR US SENATE INC

Mailing Address 105 EAST 6TH STREET

City

FREMONT

State

NE

Zip Code

68025

FEC ID number of contributing
federal political committee.

C

C00547976

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA15.10339

Amount of Each Receipt this Period

3.00

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

C. BEN SASSE FOR US SENATE INC

Mailing Address 105 EAST 6TH STREET

City

FREMONT

State

NE

Zip Code

68025

FEC ID number of contributing
federal political committee.

C

C00547976

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA15.10336

Amount of Each Receipt this Period

3.00

Processing and fundraising fee

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

156.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 66 OF 140

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City

DARDANELLE

State

AR

Zip Code

72834

FEC ID number of contributing
federal political committee.

C

C00499988

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

362.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA15.10337

Amount of Each Receipt this Period

7.50

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

B. COTTON FOR SENATE

Mailing Address PO BOX 379

City

DARDANELLE

State

AR

Zip Code

72834

FEC ID number of contributing
federal political committee.

C

C00499988

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA15.10331

Amount of Each Receipt this Period

3.00

Processing fee

Full Name (Last, First, Middle Initial)

C. COTTON FOR SENATE

Mailing Address PO BOX 379

City

DARDANELLE

State

AR

Zip Code

72834

FEC ID number of contributing
federal political committee.

C

C00499988

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.70

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA15.10320

Amount of Each Receipt this Period

25.50

Processing and fundraising fee

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

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

36.00

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

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

FOR LINE NUMBER: PAGE 67 OF 140

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City State Zip Code
DARDANELLE AR 72834

FEC ID number of contributing
federal political committee.

C C00499988

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.20

Date of Receipt

11 / **05** / **2014**

Transaction ID : SA15.10369

Amount of Each Receipt this Period

7.50

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

B. COTTON FOR SENATE

Mailing Address PO BOX 379

City State Zip Code
DARDANELLE AR 72834

FEC ID number of contributing
federal political committee.

C C00499988

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.70

Date of Receipt

11 / **12** / **2014**

Transaction ID : SA15.10354

Amount of Each Receipt this Period

67.50

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

C. KAIFESH FOR CONGRESS

Mailing Address 869 E SCHAUMBURG RD #377

City State Zip Code
SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C C00551036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.20

Date of Receipt

10 / **17** / **2014**

Transaction ID : SA15.10338

Amount of Each Receipt this Period

7.50

Processing and fundraising fee

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

82.50

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 68 OF 140

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. KAIFESH FOR CONGRESS

Mailing Address 869 E SCHAUMBURG RD #377

City State Zip Code
 SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C C00551036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.70

Date of Receipt

11 / **12** / **2014**

Transaction ID : SA15.10360

Amount of Each Receipt this Period

13.50

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

B. KIRK JORGENSEN FOR CONGRESS

Mailing Address 14677 VIA BETTONA SUITE 110-835

City State Zip Code
 SAN DIEGO CA 92127

FEC ID number of contributing
federal political committee.

C C00546267

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8361.44

Date of Receipt

10 / **29** / **2014**

Transaction ID : SA15.10324

Amount of Each Receipt this Period

150.00

Processing and fundraising fee

Full Name (Last, First, Middle Initial)

C.

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

11 / **12** / **2014**

Amount of Each Receipt this Period

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

163.50

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

581.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 140

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. ActRight FundMailing Address 2029 K St NW
Suite 300

City Washington State DC Zip Code 20006

Purpose of Disbursement
Web development and website rental

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 24 / 2014**Transaction ID : SB21B.10330**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. ActRight FundMailing Address 2029 K St NW
Suite 300

City Washington State DC Zip Code 20006

Purpose of Disbursement
Website maintenance and rental

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 06 / 2014**Transaction ID : SB21B.10366**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 200 Vesey St

City Manhattan State NY Zip Code 10080

Purpose of Disbursement
Merchant settlement

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 17 / 2014**Transaction ID : SB21B.10383**

Amount of Each Disbursement this Period

25.24

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

2025.24

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

Age Group	Percentage
18-24	~1.5%
25-34	~1.5%
35-44	~1.5%
45-54	~1.5%
55-64	~1.5%
65-74	~1.5%
75-84	~1.5%
85+	3.91%

Category	Percentage
Very satisfied	3.48

8.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 140

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 200 Vesey St

City Manhattan State NY Zip Code 10080

Purpose of Disbursement
Merchant settlement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2014
Transaction ID : SB21B.10387

Amount of Each Disbursement this Period

10.14

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 200 Vesey St

City Manhattan State NY Zip Code 10080

Purpose of Disbursement
Merchant settlement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2014
Transaction ID : SB21B.10388

Amount of Each Disbursement this Period

18.55

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address 200 Vesey St

City Manhattan State NY Zip Code 10080

Purpose of Disbursement
Merchant settlement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2014
Transaction ID : SB21B.10389

Amount of Each Disbursement this Period

0.29

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

28.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 140

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 200 Vesey St

City
ManhattanState
NYZip Code
10080Purpose of Disbursement
Merchant settlement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2014
Transaction ID : SB21B.10390

Amount of Each Disbursement this Period

0.46

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 200 Vesey St

City
ManhattanState
NYZip Code
10080Purpose of Disbursement
Merchant settlement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2014
Transaction ID : SB21B.10391

Amount of Each Disbursement this Period

0.17

Full Name (Last, First, Middle Initial)

C. PNC BankMailing Address 249 Fifth Ave
One PNC PlazaCity
PittsburghState
PAZip Code
15222Purpose of Disbursement
Merchant interchng

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2014
Transaction ID : SB21B.10379

Amount of Each Disbursement this Period

186.15

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

186.78

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 140

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. PNC Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	4		

Mailing Address 249 Fifth Ave
One PNC Plaza

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement
Merchant discount

001

Candidate Name

Category/
Type**Transaction ID : SB21B.10380**

Amount of Each Disbursement this Period

53.73

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

Full Name (Last, First, Middle Initial)

B. PNC Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	4		

Mailing Address 249 Fifth Ave
One PNC Plaza

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement
Merchant fee

Candidate Name

Category/
Type**Transaction ID : SB21B.10381**

Amount of Each Disbursement this Period

47.84

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

Full Name (Last, First, Middle Initial)

C. PNC Bank

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	1	4		

Mailing Address 249 Fifth Ave
One PNC Plaza

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement
Service charge

001

Candidate Name

Category/
Type**Transaction ID : SB21B.10382**

Amount of Each Disbursement this Period

3.00

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.57

2354.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. BELL FOR SENATE

Mailing Address PO BOX 31

City	State	Zip Code
PALISADES PARK	NJ	07650

Purpose of Disbursement
Castleberry, Susan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NJ	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB23.10708

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. BELL FOR SENATE

Mailing Address PO BOX 31

City	State	Zip Code
PALISADES PARK	NJ	07650

Purpose of Disbursement
Kimball, Lange

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NJ	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB23.10710

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. BELL FOR SENATE

Mailing Address PO BOX 31

City	State	Zip Code
PALISADES PARK	NJ	07650

Purpose of Disbursement
Johnson, Martha

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NJ	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB23.10734

Amount of Each Disbursement this Period

100.00

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

2710.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. BELL FOR SENATE

Mailing Address PO BOX 31

City	State	Zip Code
PALISADES PARK	NJ	07650

Purpose of Disbursement
Mas, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NJ	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10709

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. BELL FOR SENATE

Mailing Address PO BOX 31

City	State	Zip Code
PALISADES PARK	NJ	07650

Purpose of Disbursement
Brown, Brian

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NJ	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10820

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. BEN SASSE FOR US SENATE INC

Mailing Address 105 EAST 6TH STREET

City	State	Zip Code
FREMONT	NE	68025

Purpose of Disbursement
Carlson, Dan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NE	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB23.10695

Amount of Each Disbursement this Period

10.00

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

520.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Mercer, Joshua

Candidate Name

Category/
Type**Transaction ID : SB23.10697**

Amount of Each Disbursement this Period

100.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Wakelin, John

Candidate Name

Category/
Type**Transaction ID : SB23.10742**

Amount of Each Disbursement this Period

200.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Gremore, Pam

Candidate Name

Category/
Type**Transaction ID : SB23.10743**

Amount of Each Disbursement this Period

25.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

325.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Feagles, Patricia

Candidate Name

Category/
Type**Transaction ID : SB23.10746**

Amount of Each Disbursement this Period

15.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Bartlett, James

Candidate Name

Category/
Type**Transaction ID : SB23.10776**

Amount of Each Disbursement this Period

50.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Picou, Jon

Candidate Name

Category/
Type**Transaction ID : SB23.10789**

Amount of Each Disbursement this Period

100.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

165.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
gromowsky, charles

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10790

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Boyce, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10791

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Sibal, Marianne

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10792

Amount of Each Disbursement this Period

25.00

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

100.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Scarzafava, Gary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10793

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Long, Jeff

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10794

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Strelchun, Thomas

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10797

Amount of Each Disbursement this Period

25.00

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

175.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Walker, Don

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10798

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Mullins, Thomas

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10799

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
SANVI, JENNY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10800

Amount of Each Disbursement this Period

50.00

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

70.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
McTeague, Maryellen

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10801

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Rose, Maureen

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10803

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Deering, Michele

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10804

Amount of Each Disbursement this Period

20.00

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

95.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Fuller, Jo-Ann

Candidate Name

Category/
Type**Transaction ID : SB23.10805**

Amount of Each Disbursement this Period

50.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Oliver, Ellen

Candidate Name

Category/
Type**Transaction ID : SB23.10806**

Amount of Each Disbursement this Period

50.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Villarreal, Mary

Candidate Name

Category/
Type**Transaction ID : SB23.10808**

Amount of Each Disbursement this Period

10.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

110.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Avila, Henry

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10814

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Nickander, Joan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10816

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Williams, Matthew

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10818

Amount of Each Disbursement this Period

50.00

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

150.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Bezruchka, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10822

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

B. CATHOLICVOTE.ORG CANDIDATE FUND

Mailing Address PO BOX 2709

City	State	Zip Code
CHICAGO	IL	60690

Purpose of Disbursement
Cosby, Josephine

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10850

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Carlson, Dan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CO District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB23.10698

Amount of Each Disbursement this Period

10.00

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

40.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Platt, Philip

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CO	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10699

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Mas, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CO	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10700

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Moran, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CO	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10736

Amount of Each Disbursement this Period

50.00

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

95.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Krauss, Jim

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CO District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10825

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CO District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10832

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City	State	Zip Code
LONE TREE	CO	80124

Purpose of Disbursement
Harris, Christopher

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CO District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10841

Amount of Each Disbursement this Period

5.00

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

225.00

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. COTTON FOR SENATE

Three digital displays showing the date 10/17/2014 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '17' with 'D' indicators above it. The third display shows '2014' with 'Y' indicators above it.

Transaction ID : SB23.10701

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

10.00

B. COTTON FOR SENATE

M M / D D / Y Y Y Y
10 29 2014

Transaction ID : SB23.10702

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

C. COTTON FOR SENATE

Three digital displays showing the date 10/29/2014 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '29' with 'D' indicators above it. The third display shows '2014' with 'Y' indicators above it.

Transaction ID : SB23.10703

Category/
Type

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

80.00

[illegible]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City DARDANELLE	State AR	Zip Code 72834
--------------------	-------------	-------------------

Purpose of Disbursement
Mas, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AR	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10704

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR SENATE

Mailing Address PO BOX 379

City DARDANELLE	State AR	Zip Code 72834
--------------------	-------------	-------------------

Purpose of Disbursement
Moran, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AR	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10737

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. COTTON FOR SENATE

Mailing Address PO BOX 379

City DARDANELLE	State AR	Zip Code 72834
--------------------	-------------	-------------------

Purpose of Disbursement
Krauss, Jim

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AR	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10828

Amount of Each Disbursement this Period

200.00

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

240.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AR	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10834

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. COTTON FOR SENATE

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
Harris, Christopher

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AR	District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10844

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF COLONEL ROB MANESS

Mailing Address PO BOX 25

City	State	Zip Code
MADISONVILLE	LA	70447

Purpose of Disbursement
Carlson, Dan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: LA	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB23.10730

Amount of Each Disbursement this Period

10.00

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

35.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE BRAT

Mailing Address PO BOX 5094

City	State	Zip Code
GLEN ALLEN	VA	23058

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: VA	District: 07

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10836

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR US SENATE INC

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Carlson, Dan

Candidate Name

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: IA	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SB23.10711

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. JONI ERNST FOR US SENATE INC

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Platt, Philip

Candidate Name

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: IA	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10712

Amount of Each Disbursement this Period

20.00

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

40.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Mas, William

Candidate Name

Category/
Type**Transaction ID : SB23.10713**

Amount of Each Disbursement this Period

25.00

Office Sought:	House	Disbursement For: 2014
<input checked="" type="checkbox"/>	Senate	
<input type="checkbox"/>	President	
State: IA	District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Schoonmaker, Kevin

Candidate Name

Category/
Type**Transaction ID : SB23.10823**

Amount of Each Disbursement this Period

25.00

Office Sought:	House	Disbursement For: 2014
<input checked="" type="checkbox"/>	Senate	
<input type="checkbox"/>	President	
State: IA	District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Krauss, Jim

Candidate Name

Category/
Type**Transaction ID : SB23.10826**

Amount of Each Disbursement this Period

200.00

Office Sought:	House	Disbursement For: 2014
<input checked="" type="checkbox"/>	Senate	
<input type="checkbox"/>	President	
State: IA	District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Barry, Michael

Candidate Name

Category/
Type**Transaction ID : SB23.10833**

Amount of Each Disbursement this Period

40.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: IA	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Mailing Address PO BOX 93441

City	State	Zip Code
DES MOINES	IA	50393

Purpose of Disbursement
Harris, Christopher

Candidate Name

Category/
Type**Transaction ID : SB23.10843**

Amount of Each Disbursement this Period

5.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: IA	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. KAIFESH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Mailing Address 869 E SCHAUMBURG RD #377

City	State	Zip Code
SCHAUMBURG	IL	60194

Purpose of Disbursement
Barry, Michael

Candidate Name

Category/
Type**Transaction ID : SB23.10837**

Amount of Each Disbursement this Period

45.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: IL	District: 08

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

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

90.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. KING FOR CONGRESSMailing Address 202 W 2ND ST.
PO BOX 398

City WALL LAKE State IA Zip Code 51466

Purpose of Disbursement
Brown, Brian

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: IA District: 04Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10819

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. KING FOR CONGRESSMailing Address 202 W 2ND ST.
PO BOX 398

City WALL LAKE State IA Zip Code 51466

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: IA District: 04Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10838

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. KIRK JORGENSEN FOR CONGRESS

Mailing Address 14677 VIA BETTONA SUITE 110-835

City SAN DIEGO State CA Zip Code 92127

Purpose of Disbursement
mershon, judith

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: CA District: 52Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10714

Amount of Each Disbursement this Period

500.00

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

620.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. MCSALLY FOR CONGRESS

Mailing Address PO BOX 19128

City
TUCSONState
AZZip Code
85731Purpose of Disbursement
Mas, William

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: AZ District: 02

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10716

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. NATIONAL ORGANIZATION FOR MARRIAGE PAC

Mailing Address 2029 K STREET NW STE 300

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Biesinger, Emily

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10812

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. NOM Federal PAC

Mailing Address 2029 K St. NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Fabeny, Colin

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10720

Amount of Each Disbursement this Period

50.00

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

125.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Federal PAC

Category/
Type

State: District:

B. NOM Federal PAC

M M / D D / Y Y Y Y
10 29 2014

Category/
Type

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	100.00%

State: District:

C. NOM Federal PAC

Category/
Type

30.00

State: District:

140.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

A. NOM Federal PAC

Category/
Type

25.00

State: District:

B. NOM Federal PAC

Category/
Type

State: District:

C. NOM Federal PAC

Category/
Type

25.00

State: District:

150.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Victory Fund

Category/
Type

100.00

State: District:

B. NOM Victory Fund

MM / DD / YYYY

Category/
Type

100.00

State: District:

C. NOM Victory Fund

Category/
Type

50.00

State: District:

250.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Victory Fund

Category/
Type

50.00

State: District:

B. NOM Victory Fund

Category/
Type

25.00

State: District:

C. NOM Victory Fund

Category/
Type

State: District:

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Victory Fund

Date of Disbursement

Mailing Address 2029 K Street NW

City	State	Zip Code
WASHINGTON	DC	20006

Transaction ID : SB23.10761

Purpose of Disbursement	Zitkus, Kristi
-------------------------	----------------

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: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

10.00

Full Name (Last, First, Middle Initial)

B. NOM Victory Fund

Date of Disbursement

Mailing Address 2029 K Street NW

City	State	Zip Code
WASHINGTON	DC	20006

Transaction ID : SB23.10762

Purpose of Disbursement	Brant, Judith
-------------------------	---------------

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: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

100.00

Full Name (Last, First, Middle Initial)

C. NOM Victory Fund

Date of Disbursement

Mailing Address 2029 K Street NW



City	State	Zip Code
WASHINGTON	DC	20006

Transaction ID : SB23.10763

Purpose of Disbursement	Gehringer, Edward
-------------------------	-------------------

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: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

75.00

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

185.00

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

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Victory Fund

Category/
Type

Age Group	Number of people
13-17	10.0
18-24	15.0
25-34	20.0
35-44	25.0
45-54	20.0
55-64	15.0
65-74	10.0
75-84	5.0
85+	2.0

State: District:

B. NOM Victory Fund

Category/
Type

Age Group	Percentage
18-24	100.00
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	100.00

State: District:

C. NOM Victory Fund

Category/
Type

50.00

State: District:

225.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

Category/
Type

100.00



Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '11' with two squares above it. The second display shows '05' with two squares above it. The third display shows '2014' with four squares above it.

Category/
Type

25.00

Amount of Each Disbursement this Period

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) _____

25.00

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
dillinger, william

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10773

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Richardson, Reece and Lorene

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10774

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Sanford, Robert

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10775

Amount of Each Disbursement this Period

100.00

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

225.00

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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

Category/
Type

A horizontal bar with a value of 25.00. The bar is light gray with a darker gray border. The value "25.00" is displayed in black text at the right end of the bar.

Category/
Type

25.00

Category/
Type

100.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Blass, Andreas

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10780

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Shivanandan, Mary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10781

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
Nalitz, Patricia

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10782

Amount of Each Disbursement this Period

25.00

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

150.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 OF 140

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. NOM Victory Fund

Mailing Address 2029 K Street NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Hernandez, Shannon

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 05 / 2014

Transaction ID : SB23.10783

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. NOM Victory Fund

Mailing Address 2029 K Street NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Bates, Joanne

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 05 / 2014

Transaction ID : SB23.10784

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. NOM Victory Fund

Mailing Address 2029 K Street NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Roth, Allen

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 05 / 2014

Transaction ID : SB23.10785

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►

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

310.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

ACTRIGHT

50.00



Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '11' with two squares above it. The second display shows '05' with two squares above it. The third display shows '2014' with four squares above it.

42.00

10.00

State: District:

102.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

ACTRIGHT

A. NOM Victory Fund

Category/
Type

Age Group	Number of People
0-14	20.72
15-24	18.56
25-34	16.40
35-44	14.24
45-54	12.08
55-64	9.92
65-74	7.76
75-84	5.60
85+	3.44

State: District:

B. NOM Victory Fund

Candidate Name

Category/
Type

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	50

State: District:

C. NOM Victory Fund

Candidate Name

Category/
Type

50.00

State: District:

120.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. NOM Victory Fund

Mailing Address 2029 K Street NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
VON SPIEGEL, JANICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10840

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. RATCLIFFE FOR CONGRESSMailing Address 2931 RIDGE ROAD SUITE 101
PMB #217City
ROCKWALLState
TXZip Code
75032Purpose of Disbursement
Kimball, Lange

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SB23.10707

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City
ANCHORAGEState
AKZip Code
99503Purpose of Disbursement
Mas, William

Candidate Name

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: AK

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10705

Amount of Each Disbursement this Period

15.00

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

50.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City	State	Zip Code
ANCHORAGE	AK	99503

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AK	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10835

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City	State	Zip Code
ANCHORAGE	AK	99503

Purpose of Disbursement
Harris, Christopher

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: AK	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10842

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City	State	Zip Code
CORNELIUS	NC	28031

Purpose of Disbursement
Brown, Sidney R

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NC	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10731

Amount of Each Disbursement this Period

50.00

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

75.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City CORNELIUS	State NC	Zip Code 28031
-------------------	-------------	-------------------

Purpose of Disbursement
Platt, Philip

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NC	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10732

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City CORNELIUS	State NC	Zip Code 28031
-------------------	-------------	-------------------

Purpose of Disbursement
Mas, William

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NC	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.10733

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City CORNELIUS	State NC	Zip Code 28031
-------------------	-------------	-------------------

Purpose of Disbursement
Schoonmaker, Kevin

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NC	District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10824

Amount of Each Disbursement this Period

25.00

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

65.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City	State	Zip Code
CORNELIUS	NC	28031

Purpose of Disbursement
Krauss, Jim

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 00

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10827

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City	State	Zip Code
CORNELIUS	NC	28031

Purpose of Disbursement
Barry, Michael

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 00

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10839

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Mason, Earl

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10739

Amount of Each Disbursement this Period

25.00

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

145.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Williams, Thomas

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10740

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
McAllister, Kathleen

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10744

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Kruse, David

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10745

Amount of Each Disbursement this Period

25.00

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

60.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Hayes, Russell

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10755

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
meyer, wendell

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10795

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Villamana, Thomas

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10802

Amount of Each Disbursement this Period

25.00

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

60.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Potts, Gerald

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10807

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Eldridge, Adelbert E.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10809

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Peterson, Richard

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SB23.10810

Amount of Each Disbursement this Period

10.00

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

45.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Wahmund, Barbara

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2014

Transaction ID : SB23.10813

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Coats, Gary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10830

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Moon, Joan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10845

Amount of Each Disbursement this Period

10.00

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

60.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Hilliard, Larry

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10846

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Burns, Jack

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2014

Transaction ID : SB23.10847

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Phair, Daniel D

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		19		2014

Transaction ID : SB23.10848

Amount of Each Disbursement this Period

10.00

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

120.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 140

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ACTRIGHT

Full Name (Last, First, Middle Initial)

A. VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		19		2014

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
Chui, Christopher

Candidate Name

Category/
Type**Transaction ID : SB23.10849**

Amount of Each Disbursement this Period

10.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

10.00

9908.72

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 124 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

August use of mailing address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4148

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

September use of address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

October use of mailing address, phone, office

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4178

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

750.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 125 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

November use of mailing address, phone,
officeMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4179

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

December use of mailing address, phone,
officeMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD10.4180

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

Mass emails supporting Jorgensen for
CongressMailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

4357.75

Transaction ID : SD10.5069

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4357.75

1) **SUBTOTALS** This Period This Page (optional)..... ►

4707.75

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 126 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Action

Nature of Debt (Purpose):

Fundraising emails in July

Mailing Address 2029 K Street NW
Suite 300City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period

3606.78

Transaction ID : SD10.5212

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3606.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

February and March reporting and processing services retainer

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4181

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

April retainer for reporting and processing services

Mailing Address 209 W Main St

City State Zip Code
Plainfield IN 46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4190

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6606.78

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 127 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

May reporting and processing services
retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4191

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

May reporting and processing services and
June retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2748.93

Transaction ID : SD10.4192

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2748.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

June reporting and processing services and
July retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2767.00

Transaction ID : SD10.4193

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2767.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6515.93

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 128 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

October reporting and processing services and
November retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

307.50

Transaction ID : SD10.4186

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

307.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

November reporting and processing services
and December retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2657.00

Transaction ID : SD10.4185

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2657.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

December reporting and processing services
and Jan retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2465.00

Transaction ID : SD10.4184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2465.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5429.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 129 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

January reporting and processing services and
Feb retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2255.00

Transaction ID : SD10.4233

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2255.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Feb reporting and processing/Mar legal and
reporting retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4319

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Mar reporting and processing/Apr legal and
reporting retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.4374

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6255.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 130 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal compliance, bookkeeping, and reporting
services in April

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

3737.50

Transaction ID : SD10.4702

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3737.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal compliance, bookkeeping, and reporting
services in May

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2907.50

Transaction ID : SD10.5067

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2907.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

June administrative and legal services.

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2477.05

Transaction ID : SD10.5569

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2477.05

1) **SUBTOTALS** This Period This Page (optional)..... ►

9122.05

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 131 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Bundling, administrative, legal, and office
services

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2077.60

Transaction ID : SD10.5600

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2077.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Sept. bundling, administrative, legal, and office
services

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2067.50

Transaction ID : SD10.5971

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2067.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Sept. reporting and processing services and
Oct. retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

2097.50

Transaction ID : SD10.6485

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2097.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

6242.60

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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PAGE 132 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Reporting, bundling, compliance, and admin
services in October

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1605.00

Transaction ID : SD10.6817

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1605.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance, reporting, and bundling services
in November

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1130.00

Transaction ID : SD10.7051

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1130.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance, reporting, bundling, and
administrative services in Dec 2013

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1235.00

Transaction ID : SD10.7356

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1235.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3970.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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PAGE 133 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance and administrative services in January

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

854.20

Transaction ID : SD10.7717

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

854.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal, processing, reporting, and admin services in February

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1238.00

Transaction ID : SD10.8465

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1238.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Legal, bundling, and administrative services

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1038.00

Transaction ID : SD10.8513

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1038.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3130.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 134 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Bundling, administrative, compliance services
for May 2014

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1228.50

Transaction ID : SD10.9028

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1228.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Bundling, administrative, compliance services
for June 2014

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1305.25

Transaction ID : SD10.9248

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1305.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Bundling, administrative, compliance services
in July 2014

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

925.00

Transaction ID : SD10.9401

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

925.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3458.75

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 135 OF 140

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance and administrative services for
July 2014

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

925.00

Transaction ID : SD10.9615

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

925.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance and administrative services for
August 2014

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1677.50

Transaction ID : SD10.9911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1677.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance and administrative services for
September 2014

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10393

Amount Incurred This Period

1845.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1845.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

4448.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 136 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Compliance Services

Nature of Debt (Purpose):

Compliance and administrative services for
October 2014

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10392

Amount Incurred This Period

3210.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3210.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Fund

Nature of Debt (Purpose):

Fundraising emails in July 2013

Mailing Address 2029 K St NW

Suite 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

5024.60

Transaction ID : SD10.5208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5024.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

April legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

9234.60

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 137 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

May legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4199

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

June legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

July legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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PAGE 138 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

August legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

September legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4203

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

October legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
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PAGE 139 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

November legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

December legal services retainer

Mailing Address 209 W Main St

City State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ActRight Legal Foundation

Nature of Debt (Purpose):

March legal services retainer

Mailing Address 209 W Main St

City

State

Zip Code

Plainfield

IN

46168

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4196

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3000.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 140 OF 140

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
ACTRIGHT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Barry A BostromNature of Debt (Purpose):
Legal services in January

Mailing Address 2524 N 8th Street

City State

Zip Code

Terre Haute

IN

47804

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.4194

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Paul Bothwell

Nature of Debt (Purpose):

Administrative services July 2011 - March 2012

Mailing Address 606 S. Taylor St.

City State

Zip Code

Arlington

VA

22204

Outstanding Balance Beginning This Period

5400.00

Transaction ID : SD10.4230

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

6400.00

2) **TOTALS** This Period (last page this line number only)..... ►

85271.16

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

85271.16