



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Funeral Directors Association of the United States Inc

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2013"/>  |                         | 30770.37                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 30770.37                |                                   |
| (c) Total Receipts (from Line 19) .....  | 12720.00                | 12720.00                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 43490.37                | 43490.37                          |
| 7. Total Disbursements (from Line 31).....   | 12000.00                | 12000.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 31490.37                | 31490.37                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**National Funeral Directors Association of the United States Inc**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 4500.00                       | 4500.00                           |
| (ii) Unitemized .....   | 8220.00                       | 8220.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 12720.00                      | 12720.00                          |
| (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) .....  | 12720.00                      | 12720.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶                        | 12720.00                      | 12720.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 12720.00                      | 12720.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 12000.00                      | 12000.00                          |
| 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                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 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)) ..      | 12000.00                      | 12000.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 12000.00                      | 12000.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 12720.00                      | 12720.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 12720.00                      | 12720.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 0.00                              |

**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 6 OF 12  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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)  
**National Funeral Directors Association of the United States Inc**

**A. Scott B Anthony**  
Full Name (Last, First, Middle Initial)

Mailing Address 1031 Ridge Rd

City Webster State NY Zip Code 14580-2907

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

Name of Employer: Anthony Funeral Chapel Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 19 / 2013  
**Transaction ID : SA11AI.17257**

Amount of Each Receipt this Period: 300.00

**B. Tamara Baird**  
Full Name (Last, First, Middle Initial)

Mailing Address 555 N Market St

City Troy State OH Zip Code 45373-1417

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

Name of Employer: Baird Funeral Home Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 13 / 2013  
**Transaction ID : SA11AI.17233**

Amount of Each Receipt this Period: 250.00

**C. Heather M Coats**  
Full Name (Last, First, Middle Initial)

Mailing Address 3141 Sashabaw Rd

City Waterford State MI Zip Code 48329-4042

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

Name of Employer: Coats Funeral Home Occupation: Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 26 / 2013  
**Transaction ID : SA11AI.17339**

Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

**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 7 OF 12                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**National Funeral Directors Association of the United States Inc**

**A. Terence Desmnd**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2600 Crooks Rd  
City Troy State MI Zip Code 48084-4713  
FEC ID number of contributing federal political committee. **C**  
Name of Employer A J Desmond & Sons FD Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2013  
**Transaction ID : SA11AI.17269**  
Amount of Each Receipt this Period  
250.00

**B. James M. Dowdle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 64 Ashford Ave  
City Dobbs Ferry State NY Zip Code 10522-1816  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Edwards-Dowdle FH Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2013  
**Transaction ID : SA11AI.17325**  
Amount of Each Receipt this Period  
250.00

**C. Brent D Erickson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 508 Park Pl  
City Darlington State WI Zip Code 53530-1313  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Erickson Funeral Home Occupation Funeral Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2013  
**Transaction ID : SA11AI.17320**  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 8 OF 12  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**National Funeral Directors Association of the United States Inc**

**A. Karellen K Larrison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 Country Club Rd  
 City Pratt State KS Zip Code 67124-3149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Larrison Mortuary Ltd Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2013  
**Transaction ID : SA11AI.17324**  
 Amount of Each Receipt this Period  
 250.00

**B. Joseph T Paquelet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Wales Rd NE  
 City Massillon State OH Zip Code 44646-4432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Paquelet Funeral Home Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2013  
**Transaction ID : SA11AI.17338**  
 Amount of Each Receipt this Period  
 250.00

**C. John G Parker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 Hackett Ridge Rd  
 City Brooksville State KY Zip Code 41004-8236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Palmer Funeral Home Occupation Funeral Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2013  
**Transaction ID : SA11AI.17334**  
 Amount of Each Receipt this Period  
 250.00

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



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

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

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NAME OF COMMITTEE (In Full)  
**National Funeral Directors Association of the United States Inc**

**A. David R Pearson**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1444

City Galesburg State IL Zip Code 61401

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

Name of Employer Hinchliff-Pearson-West Inc Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
03 / 14 / 2013  
**Transaction ID : SA11AI.17216**

Amount of Each Receipt this Period  
500.00

**B. Clark D Pulliam**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 692

City Robinson State IL Zip Code 62454-0692

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

Name of Employer Pulliam Funeral Homes PC Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 19 / 2013  
**Transaction ID : SA11AI.17217**

Amount of Each Receipt this Period  
250.00

**C. Terry Reardon**  
Full Name (Last, First, Middle Initial)

Mailing Address 4303 Mahoning Ave

City Youngstown State OH Zip Code 44515-2721

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

Name of Employer Higgins-Reardon Funeral Home Occupation Funeral Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 19 / 2013  
**Transaction ID : SA11AI.17254**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**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 10 OF 12               |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 |
|   |                              |                                   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**National Funeral Directors Association of the United States Inc**

**A. Robert T Rosson Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1200

City Oxford State MS Zip Code 38655

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

Name of Employer Waller Funeral Home Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2013  
**Transaction ID : SA11AI.17258**

Amount of Each Receipt this Period  
 400.00

**B. William P Rutherford**  
Full Name (Last, First, Middle Initial)

Mailing Address 1114 Highland Drive

City Columbus State OH Zip Code 43220-4940

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

Name of Employer Rutherford Funeral Home Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2013  
**Transaction ID : SA11AI.17224**

Amount of Each Receipt this Period  
 500.00

**C. William L Wilson**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 277

City Ava State IL Zip Code 62907-0277

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

Name of Employer Wilson's Funeral Homes Ltd Occupation Funeral Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2013  
**Transaction ID : SA11AI.17292**

Amount of Each Receipt this Period  
 250.00

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1150.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 4500.00 |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input 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)

**National Funeral Directors Association of the United States Inc**

Full Name (Last, First, Middle Initial)

**A. LATHAM FOR CONGRESS**

Mailing Address PO BOX 8237

City DES MOINES State IA Zip Code 50301

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: IA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 25    | / | 2013      |

**Transaction ID : SB23.17206**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. LYNN JENKINS FOR CONGRESS**

Mailing Address PO BOX 1441

City TOPEKA State KS Zip Code 66601

Purpose of Disbursement

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 |
| 03    | / | 18    | / | 2013      |

**Transaction ID : SB23.17208**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. RADEL, HENRY J. III**

Mailing Address 4360 LAZIO WAY #1008

City FORT MYERS State FL Zip Code 33901

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: FL District: 19

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 25    | / | 2013      |

**Transaction ID : SB23.17213**

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

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

|         |
|---------|
| 7000.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input 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)

**National Funeral Directors Association of the United States Inc**

Full Name (Last, First, Middle Initial)

**A. RANDY HULTGREN FOR CONGRESS**

Mailing Address PO BOX 717

City ST CHARLES State IL Zip Code 60174

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: IL District: 14

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2013

**Transaction ID : SB23.17209**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. SOUTH DAKOTA FIRST**

Mailing Address PO BOX 155

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2013

**Transaction ID : SB23.17211**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. WHITFIELD FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: KY District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2013

**Transaction ID : SB23.17205**

Amount of Each Disbursement this Period

1000.00

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

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

5000.00

12000.00