

Charles E. Hardy
P.O. Box 1951
Cheyenne, Wyoming 82003

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
15 OCT 15 PM 2:48

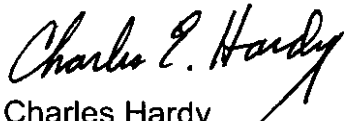
October 1, 2015

The Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Dear Friends,

In preparing this termination report, we became aware of the fact that some expenditures between 10/13/2014 and 11/04/2013 had not been reported. Rather than send a number of amended reports, these expenditures appear in this final report on pages 11 to 27.

Sincerely,



Charles Hardy
Treasurer
Charlie Hardy for U.S. Senate Committee

201510160200269119

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

15 OCT 15 PM 2:49

Office Use Only

FEC
FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CHARLIE HARDY FOR U.S. SENATE

ADDRESS (number and street)

P.O. BOX 1222



Check if different than previously reported. (ACC)

CHEYENNE

WY

82003-1222

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00554758

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

WY

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

5. Covering Period

07

01

2015

through

09

30

2015

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

CHARLES E HARDY

Signature of Treasurer

Charles E. Hardy

Date

10

07

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

CHARLIE HARDY FOR U.S. SENATE

Report Covering the Period:

From:

07 01 2015

To:

09 30 2015

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))..

2154.00

7741618

(b) Total Contribution Refunds
(from Line 20(d))..

000

98360

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))..

2154.00

7643258

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17) ..

3237.34

9545071

(b) Total Offsets to Operating
Expenditures (from Line 14)...

000

000

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))..

3237.34

9545071

8. Cash on Hand at Close of
Reporting Period (from Line 27)...

140

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

000

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D) ..

3599445

For further information contact:

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

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

201510160200269121

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

CHARLIE HARDY FOR U.S. SENATE

Report Covering the Period: From:

07 01 2015

To:

09 30 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) ..	1714.00	3991739
(ii) Unitemized	440.00	3749879
(iii) TOTAL of contributions from individuals ..	2154.00	7741618
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2154.00	7741618
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	2920941
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	2920941
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	2154.00	10662559

201510160200269122

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	323734	9545071
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	000	000
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	180941	1155941
(b) Of All Other Loans	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	180941	1155941
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	000	98360
(b) Political Party Committees...	000	000
(c) Other Political Committees (such as PACs) ..	000	000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	000	98360
21. OTHER DISBURSEMENTS ..	000	000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	504675	10799372

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	152474
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	171400
25. SUBTOTAL (add Line 23 and Line 24)...	323874
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	323734
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	140

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE <u>5</u> OF <u>40</u>
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial)
A. JACK FINVERTY

Date of Receipt
M M ' D D ' Y Y Y Y
07 01 2015

Mailing Address
P.O. BOX 186

City State Zip Code
WHEATLAND WY 82201

Amount of Each Receipt this Period
, 150.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
SELF-EMPLOYED RANCHER

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
RETIRE CAMPAIGN DEBT **, 450.00**

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

Date of Receipt
M M ' D D ' Y Y Y Y
08 17 2015

Mailing Address
110 BALSAM STREET

City State Zip Code
BUFFALO WY 82834

Amount of Each Receipt this Period
, 200.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
CHARLOTTE IRLGARY CAREGIVER

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
RETIRE CAMPAIGN DEBT **, 1,340.00**

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

Date of Receipt
M M ' D D ' Y Y Y Y
08 28 2015

Mailing Address
2843 DEMING BLVD

City State Zip Code
CHEYENNE WY 82001

Amount of Each Receipt this Period
, 364.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
RETIRED

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)
RETIRE CAMPAIGN DEBT **, 1,864.00**

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

, 714.00

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

, 714.00

201510160200269124

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

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

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **40**

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial) A. ROCH CARTER		Date of Receipt 08 31 2015
Mailing Address 11019 N BALSAM TREE CT		Amount of Each Receipt this Period 1,000.00
City MEQUON	State Zip Code WI 53092	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2,000.00 for Primary 1,000.00 for General
Name of Employer RETIRED	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3,000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1,000.00
TOTAL This Period (last page this line number only).....	

201510160200269125

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **7** OF **40**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
CHARLIE HARDY FOR U.S. SENATE

A. Full Name (Last, First, Middle Initial)
NESTOR, MELANIE

Mailing Address
314 W 18 STREET

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **McGEE, HEARNE & PAIZ, LLP** Occupation **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
405.45

Date of Receipt
08 27 2015

Amount of Each Receipt this Period
405.45

MEMO EXEMPT ACCOUNTING SERVICES

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

Mailing Address
314 W 18 STREET

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **McGEE, HEARNE & PAIZ, LLP** Occupation **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
304.75

Date of Receipt
08 27 2015

Amount of Each Receipt this Period
304.75

MEMO EXEMPT ACCOUNTING SERVICES

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

000

1,714.00

201510160200269126

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

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

FOR LINE NUMBER: (check only one)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

A AMERICAN EXPRESS

Mailing Address: **P.O. BOX 297812**

City: **FT LAUDERDALE** State: **FL** Zip Code: **33329-7812**

Purpose of Disbursement: **CREDIT CARD PAYMENT**

Candidate Name: **CHARLIE HARDY** Category/Type:

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **07 06 2015**

Amount of Each Disbursement this Period: **374.00**

SPECIFICATION: **POST ELECTION**

B. AMERICAN EXPRESS

Mailing Address: **P.O. BOX 297812**

City: **FT LAUDERDALE** State: **FL** Zip Code: **33329-7812**

Purpose of Disbursement: **CREDIT CARD PAYMENT**

Candidate Name: **CHARLIE HARDY** Category/Type:

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 04 2015**

Amount of Each Disbursement this Period: **368.00**

SPECIFICATION: **POST ELECTION**

C. AMERICAN EXPRESS

Mailing Address: **P.O. BOX 297812**

City: **FT. LAUDERDALE** State: **FL** Zip Code: **33329-7812**

Purpose of Disbursement: **CREDIT CARD PAYMENT**

Candidate Name: **CHARLIE HARDY** Category/Type:

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 30 2015**

Amount of Each Disbursement this Period: **378.49**

SPECIFICATION: **POST ELECTION**

SUBTOTAL of Disbursements This Page (optional)..... **1,120.49**

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

201510160200269127

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 40

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

A AMERICAN EXPRESS

Date of Disbursement

07 23 2015

Mailing Address

P.O. BOX 297812

City

FT LAUDERDALE

State

FL

Zip Code

33329-7812

Amount of Each Disbursement this Period

204.74

Purpose of Disbursement

INTEREST ON CREDIT CARD

MEMO - AMEX CREDIT
CARD STATEMENT

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

7/23/15
SPECIFICATION:
POST ELECTION

State:

District:

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Date of Disbursement

08 23 2015

Mailing Address

P.O. BOX 297812

City

FT LAUDERDALE

State

FL

Zip Code

33329-7812

Amount of Each Disbursement this Period

202.53

Purpose of Disbursement

INTEREST ON CREDIT CARD

MEMO - AMEX CREDIT
CARD STATEMENT

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

8/23/15
SPECIFICATION:
POST ELECTION

State:

District:

Full Name (Last, First, Middle Initial)

C. US POSTAL SERVICE - CAPITOL STATION

Date of Disbursement

07 14 2015

Mailing Address

City

CHEYENNE

State

WY

Zip Code

82001

Amount of Each Disbursement this Period

8.55

Purpose of Disbursement

POSTAGE

SPECIFICATION:
POST ELECTION

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

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

8.55

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

201510160200269128

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial) A. PRECISION GRAPHICS, INC		Date of Disbursement 07 24 2015
Mailing Address 601 WEST LINCOLNWAY		Amount of Each Disbursement this Period 92.00
City CHEYENNE	State WY	
Zip Code 82001		Category/ Type
Purpose of Disbursement PRINTING		
Candidate Name CHARLIE HARDY		SPECIFICATION: POST ELECTION
Office Sought: WY	Disbursement For: <input checked="" type="checkbox"/> Other (specify)	
State: WY	District:	

Full Name (Last, First, Middle Initial) B. PRECISION GRAPHICS, INC		Date of Disbursement 07 24 2015
Mailing Address 601 WEST LINCOLNWAY		Amount of Each Disbursement this Period 5.52
City CHEYENNE	State WY	
Zip Code 82001		Category/ Type
Purpose of Disbursement PRINTING		
Candidate Name CHARLIE HARDY		SPECIFICATION: POST ELECTION
Office Sought: WY	Disbursement For: <input checked="" type="checkbox"/> Other (specify)	
State: WY	District:	

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SERVICE - CAPITOL STATION		Date of Disbursement 07 24 2015
Mailing Address U.S. POSTAL SERVICE - CAPITOL STATION		Amount of Each Disbursement this Period 19.60
City CHEYENNE	State WY	
Zip Code 82001		Category/ Type
Purpose of Disbursement POSTAGE		
Candidate Name CHARLIE HARDY		SPECIFICATION: POST ELECTION
Office Sought: WY	Disbursement For: <input checked="" type="checkbox"/> Other (specify)	
State: WY	District:	

SUBTOTAL of Disbursements This Page (optional).....	117.12
TOTAL This Period (last page this line number only).....	

201510160200269129

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial) A. THE FORGE		Date of Disbursement MM/DD/YYYY 10/13/2014
Mailing Address		Amount of Each Disbursement this Period 15.07
City LANDER	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED WILLOW RESTAURANT		Date of Disbursement MM/DD/YYYY 10/14/2014
Mailing Address		Amount of Each Disbursement this Period 13.00
City RIVERTON	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS	Category/Type	
Candidate Name CHARLIE HARDY		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SHOSHONE TRIDAL SERVICE		Date of Disbursement MM/DD/YYYY 10/14/2014
Mailing Address		Amount of Each Disbursement this Period 75.00
City FT WASHAKE	State WY	
Purpose of Disbursement FUEL	Category/Type	
Candidate Name CHARLIE HARDY		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	103.07
TOTAL This Period (last page this line number only).....	

201510160200269130

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial) A. SHOSHONE TRIBAL SERVICE		Date of Disbursement MM/DD/YYYY 10/14/2014
Mailing Address		Amount of Each Disbursement this Period 75.00
City FT WASHAKE	State WY	
Purpose of Disbursement FUEL	Category/Type	
Candidate Name CHARLIE HARDY	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WY District:	
Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. CASPER KOA KAMP GROUND		Date of Disbursement MM/DD/YYYY 10/16/2014
Mailing Address		Amount of Each Disbursement this Period 58.32
City BAR NUNN	State WY	
Purpose of Disbursement LOGGING	Category/Type	
Candidate Name CHARLIE HARDY	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WY District:	
Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. SUPER 8		Date of Disbursement MM/DD/YYYY 09/21/2014
Mailing Address		Amount of Each Disbursement this Period 98.69
City GILLETTE	State WY	
Purpose of Disbursement LOGGING	Category/Type	
Candidate Name CHARLIE HARDY	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: District:	
Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	232.01
TOTAL This Period (last page this line number only).....	

201510160200269131

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 40

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial)

A. MAVERIK #344

Date of Disbursement

10 16 2014

Mailing Address

Amount of Each Disbursement this Period

City SHERIDAN State WY Zip Code

Purpose of Disbursement

FUEL

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: WY

District:

Full Name (Last, First, Middle Initial)

B. MAVERIK #344

Date of Disbursement

10 16 2014

Mailing Address

Amount of Each Disbursement this Period

City SHERIDAN State WY Zip Code

Purpose of Disbursement

FOOD FOR VOLUNTEERS

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: WY

District:

Full Name (Last, First, Middle Initial)

C. Q DOBA #2790

Date of Disbursement

10 16 2014

Mailing Address

Amount of Each Disbursement this Period

City SHERIDAN State WY Zip Code

Purpose of Disbursement

FOOD FOR VOLUNTEERS

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: WY

District:

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

226.55

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

201510160200269132

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 40

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

A. STARBUCKS #10769

Mailing Address

City SHERIDAN State WY Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: WY
 House
 Senate
 President
 Disbursement For:
 Primary
 General
 Other (specify)

Full Name (Last, First, Middle Initial)

Date of Disbursement

10/16/2014

Amount of Each Disbursement this Period

588

B. CASPER KOA KAMPGROUND

Mailing Address

City BARNUM State WY Zip Code

Purpose of Disbursement
LODGING

Candidate Name
CHARLIE HARDY

Office Sought: WY
 House
 Senate
 President
 Disbursement For:
 Primary
 General
 Other (specify)

Full Name (Last, First, Middle Initial)

Date of Disbursement

10/17/2014

Amount of Each Disbursement this Period

29.16

C. CASPER'S GOOD COOKING

Mailing Address

City CASPER State WY Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: WY
 House
 Senate
 President
 Disbursement For:
 Primary
 General
 Other (specify)

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

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

Date of Disbursement

10/17/2014

Amount of Each Disbursement this Period

50.05

85.09

201510160200269133

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 40

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U S SENATE

Full Name (Last, First, Middle Initial)

A. EGGINGTONS

Mailing Address

City CASPER State WY Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: WY District:

Date of Disbursement

10 17 2014

Amount of Each Disbursement this Period

62.36

Full Name (Last, First, Middle Initial)

B. PILOT 00003087

Mailing Address

City LARAMIE State WY Zip Code

Purpose of Disbursement
FUEL

Candidate Name
CHARLIE HARDY

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: WY District:

Date of Disbursement

10 18 2014

Amount of Each Disbursement this Period

54.96

Full Name (Last, First, Middle Initial)

C. MILLIKEN ENTERPRISE

Mailing Address

City LARAMIE State WY Zip Code

Purpose of Disbursement

Candidate Name
CHARLIE HARDY

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: WY District:

Date of Disbursement

10 18 2014

Amount of Each Disbursement this Period

64.67

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

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

181.99

201510160200269134

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b	<input type="checkbox"/> 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U S SENATE

Full Name (Last, First, Middle Initial) A. TWIN DRAGON RESTAURANT		Date of Disbursement MM/DD/YYYY 10/19/2014
Mailing Address		Amount of Each Disbursement this Period 13.00
City CHEYENNE	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS		Category/ Type
Candidate Name CHARLIE HARDY		
Office Sought: WY	House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

Full Name (Last, First, Middle Initial) B. WYOMING FOOD FOR THOUGHT PROJECT		Date of Disbursement MM/DD/YYYY 10/06/2014
Mailing Address		Amount of Each Disbursement this Period 50.00
City CASPER	State WY	
Purpose of Disbursement DONATION - from an Anonymous Donation of Four		Category/ Type
Candidate Name CHARLES HARDY		
Office Sought: WY	House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

Full Name (Last, First, Middle Initial) C. 2 DOORS DOWN INC		Date of Disbursement MM/DD/YYYY 10/20/2014
Mailing Address		Amount of Each Disbursement this Period 15.00
City CHEYENNE	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS		Category/ Type
Candidate Name CHARLIE HARDY		
Office Sought: WY	House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

SUBTOTAL of Disbursements This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

201510160200269135

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

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U S SENATE

A. SHADOWS PUB & GRILL

Full Name (Last, First, Middle Initial) _____ Date of Disbursement
 M M / D D / Y Y Y Y
10 / 20 / 2014

Mailing Address _____

City **CHEYENNE** State **WY** Zip Code _____

Purpose of Disbursement **FOOD FOR VOLUNTEERS** Amount of Each Disbursement this Period
22.90

Candidate Name **CHARLIE HARDY** Category/Type _____

Office Sought: House Senate President Disbursement For: Primary General Other (specify) _____

State: **WY** District: _____

B. LOS ABUELOS MEXICAN RESTARANT

Full Name (Last, First, Middle Initial) _____ Date of Disbursement
 M M / D D / Y Y Y Y
10 / 21 / 2014

Mailing Address _____

City **CHEYENNE** State **WY** Zip Code _____

Purpose of Disbursement **FOOD FOR VOLUNTEERS** Amount of Each Disbursement this Period
37.00

Candidate Name **CHARLIE HARDY** Category/Type _____

Office Sought: House Senate President Disbursement For: Primary General Other (specify) _____

State: **WY** District: _____

C. KING SODPERS

Full Name (Last, First, Middle Initial) _____ Date of Disbursement
 M M / D D / Y Y Y Y
10 / 22 / 2014

Mailing Address **602 HIGHLEY**

City **RAWLINS** State **WY** Zip Code _____

Purpose of Disbursement **FOOD FOR VOLUNTEERS** Amount of Each Disbursement this Period
10.15

Candidate Name **CHARLIE HARDY** Category/Type _____

Office Sought: House Senate President Disbursement For: Primary General Other (specify) _____

State: **WY** District: _____

SUBTOTAL of Disbursements This Page (optional) **70.05**

TOTAL This Period (last page this line number only)

201510160200269136

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial) A. JIM BRIDGER TRADING POST		Date of Disbursement MM/DD/YYYY 10/29/2014
Mailing Address		Amount of Each Disbursement this Period 659
City FT. BRIDGER	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS		Category/ Type
Candidate Name CHARLIE HARDY		
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

Full Name (Last, First, Middle Initial) B. HIDE OUT HOTEL		Date of Disbursement MM/DD/YYYY 10/23/2014
Mailing Address		Amount of Each Disbursement this Period 69.55
City COREVILLE	State WY	
Purpose of Disbursement LODGING		Category/ Type
Candidate Name CHARLIE HARDY		
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

Full Name (Last, First, Middle Initial) C. HASTINGS 9824		Date of Disbursement MM/DD/YYYY 10/26/2014
Mailing Address		Amount of Each Disbursement this Period 742
City CASPER	State WY	
Purpose of Disbursement FOOD FOR VOLUNTEERS		Category/ Type
Candidate Name CHARLIE HARDY		
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WY	District:	

SUBTOTAL of Disbursements This Page (optional).....	83.56
TOTAL This Period (last page this line number only).....	

201510160200269137

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. CRAZY ATE CAFE + STEAK HOUSE		Date of Disbursement MM/DD/YYYY 10 26 2014	
Mailing Address		Amount of Each Disbursement this Period 81.09	
City MOUNTAIN VIEW	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

Full Name (Last, First, Middle Initial) B. AUTOZONE #1211		Date of Disbursement MM/DD/YYYY 10 27 2014	
Mailing Address		Amount of Each Disbursement this Period 21.19	
City ROCK SPRINGS	State WY		Zip Code
Purpose of Disbursement BUS PART			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

Full Name (Last, First, Middle Initial) C. STAPLES INC		Date of Disbursement MM/DD/YYYY 10 27 2014	
Mailing Address		Amount of Each Disbursement this Period 115.91	
City ROCK SPRINGS	State WY		Zip Code
Purpose of Disbursement PRINTING			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

SUBTOTAL of Disbursements This Page (optional).....	218.19
TOTAL This Period (last page this line number only).....	

201510160200269138

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 20 OF 40
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial) A. THIRTY FOODS		Date of Disbursement 10 29 2014	
Mailing Address		Amount of Each Disbursement this Period 11.98	
City WHEATLAND	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

Full Name (Last, First, Middle Initial) B. LOS DOMINGUEZ FAMILY MEXICAN REST.		Date of Disbursement 10 29 2014	
Mailing Address		Amount of Each Disbursement this Period 91.00	
City WHEATLAND	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

Full Name (Last, First, Middle Initial) C. THE EGG AND I		Date of Disbursement 10 30 2014	
Mailing Address		Amount of Each Disbursement this Period 17.00	
City CHEYENNE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WY	District:		

SUBTOTAL of Disbursements This Page (optional).....	119.98
TOTAL This Period (last page this line number only).....	

201510160200269139

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 40

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

A. SUBWAY 03102258

Mailing Address

City: CHEYENNE State: WY Zip Code

Purpose of Disbursement: FOOD FOR VOLUNTEERS

Candidate Name: CHARLIE HARDY

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

Date of Disbursement

MM/DD/YYYY
10/30/2014

Amount of Each Disbursement this Period

23.32

B. EXXON MOBIL 47736939

Mailing Address

City: LARAMIE State: WY Zip Code

Purpose of Disbursement: FUEL

Candidate Name: CHARLIE HARDY

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

Date of Disbursement

MM/DD/YYYY
10/30/2014

Amount of Each Disbursement this Period

27.23

C. ANB BANK

Mailing Address

City: CHEYENNE State: WY Zip Code

Purpose of Disbursement: SERVICE CHARLE

Candidate Name: CHARLIE HARDY

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

Date of Disbursement

MM/DD/YYYY
10/31/2014

Amount of Each Disbursement this Period

19.00

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

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

69.55

201510160200269140

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial) A. SWEET MELISSA CAFE		Date of Disbursement MM/DD/YYYY 10/30/2014
Mailing Address		Amount of Each Disbursement this Period 60.00
City LARAMIE State WY Zip Code	Purpose of Disbursement FOOD FOR VOLUNTEERS	
Candidate Name CHARLIE HARDY	Category/Type	
Office Sought: State WY District: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. 2 DOORS DOWN INC		Date of Disbursement MM/DD/YYYY 10/31/2014
Mailing Address		Amount of Each Disbursement this Period 27.32
City Cheyenne State WY Zip Code	Purpose of Disbursement FOOD FOR VOLUNTEERS	
Candidate Name CHARLIE HARDY	Category/Type	
Office Sought: State WY District: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. 2 DOORS DOWN INC		Date of Disbursement MM/DD/YYYY 10/31/2014
Mailing Address		Amount of Each Disbursement this Period 30.00
City CHEYENNE State WY Zip Code	Purpose of Disbursement FOOD FOR VOLUNTEERS	
Candidate Name CHARLIE HARDY	Category/Type	
Office Sought: State WY District: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	117.32
TOTAL This Period (last page this line number only).....	

201510160200269141

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial) A. LOV COM INC		Date of Disbursement 10 31 2015	
Mailing Address		Amount of Each Disbursement this Period 174.00	
City SHERIDAN	State WY		Zip Code
Purpose of Disbursement RADIO ADS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

Full Name (Last, First, Middle Initial) B. PARAMOUNT CAFE		Date of Disbursement 10 31 2015	
Mailing Address		Amount of Each Disbursement this Period 9.47	
City CHEYENNE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

Full Name (Last, First, Middle Initial) C. THE EGG AND I		Date of Disbursement 11 01 2014	
Mailing Address		Amount of Each Disbursement this Period 61.74	
City CHEYENNE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	245.21
TOTAL This Period (last page this line number only).....	

201510160200269142

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 29 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial) A. PARAMOUNT CAFE		Date of Disbursement MM/DD/YYYY 11/02/2014	
Mailing Address		Amount of Each Disbursement this Period 19.10	
City CHEYENNE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial) B. SUBWAY 03102258		Date of Disbursement MM/DD/YYYY 11/02/2014	
Mailing Address		Amount of Each Disbursement this Period 28.15	
City CHEYENNE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial) C. McALISTER'S DELI		Date of Disbursement MM/DD/YYYY 11/03/2014	
Mailing Address		Amount of Each Disbursement this Period 17.74	
City LARAMIE	State WY		Zip Code
Purpose of Disbursement FOOD FOR VOLUNTEERS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: WY	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	64.99
TOTAL This Period (last page this line number only).....	

201510160200269143

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

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

FOR LINE NUMBER: (check only one)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21
 PAGE 25 OF 40

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)
CHARLIE HARDY FOR U.S. SENATE

A. RED AND WHITE CAFE

Full Name (Last, First, Middle Initial)

Mailing Address

City **CASPER** State **WY** Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
 MM/DD/YYYY
11/03/2014

Amount of Each Disbursement this Period
36.00

B. HASTINGS

Full Name (Last, First, Middle Initial)

Mailing Address

City **LARAMIE** State **WY** Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
 MM/DD/YYYY
11/03/2014

Amount of Each Disbursement this Period
5.09

C. COAL CREEK DOWNTOWN

Full Name (Last, First, Middle Initial)

Mailing Address

City **LARAMIE** State **WY** Zip Code

Purpose of Disbursement
FOOD FOR VOLUNTEERS

Candidate Name
CHARLIE HARDY

Office Sought: **WY** House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
 MM/DD/YYYY
11/03/2014

Amount of Each Disbursement this Period
12.19

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

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

53.28

201510160200269144

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 26 OF 40
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR US SENATE

Full Name (Last, First, Middle Initial) A. SHELL OIL 5744427 9004		Date of Disbursement MM/DD/YYYY 11/03/2014
Mailing Address		Amount of Each Disbursement this Period 5.00
City LARAMIE	State WY Zip Code	
Purpose of Disbursement FOOD FOR VOLUNTEERS	Category/ Type	
Candidate Name CHARLIE HARDY		
Office Sought: WY	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PRAIRIE ROSE CAFE		Date of Disbursement MM/DD/YYYY 11/03/2014
Mailing Address		Amount of Each Disbursement this Period 23.34
City LARAMIE	State WY Zip Code	
Purpose of Disbursement FOOD FOR VOLUNTEERS	Category/ Type	
Candidate Name CHARLIE HARDY		
Office Sought: WY	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE WONDER BAR		Date of Disbursement MM/DD/YYYY 11/04/2014
Mailing Address		Amount of Each Disbursement this Period 14.00
City CASPER	State WY Zip Code	
Purpose of Disbursement FOOD FOR VOLUNTEERS	Category/ Type	
Candidate Name CHARLIE HARDY		
Office Sought: WY	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	42.34
TOTAL This Period (last page this line number only).....	3,237.34

201510160200269145

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 40

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

Full Name (Last, First, Middle Initial)

A. **CHARLES E HARDY**

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2015

Mailing Address

P.O. BOX 1951

Amount of Each Disbursement this Period

, , **809.41**

City

CHEYENNE

State

WY

Zip Code

82003

Purpose of Disbursement

PARCIAL REPAYMENT OF LOAN FROM CANDIDATE

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

WY

District:

Full Name (Last, First, Middle Initial)

B. **CHARLES E HARDY**

Date of Disbursement

M M / D D / Y Y Y Y
09 / 14 / 2015

Mailing Address

P.O. BOX 1951

Amount of Each Disbursement this Period

, , **1,000.00**

City

CHEYENNE

State

WY

Zip Code

82003

Purpose of Disbursement

PARCIAL REPAYMENT OF LOAN FROM CANDIDATE

Candidate Name

CHARLIE HARDY

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

W

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

, ,

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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).....

, , **1,809.41**

201510160200269146

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▾

Mailing Address

P.O. BOX 1951

City

CHEYENNE

State

WY

ZIP Code

82003-1951

Original Amount of Loan

809.41

Cumulative Payment To Date

809.41

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

VARIOUS

Date Due

NO DUE DATE

Interest Rate

0.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

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

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

201510160200269147

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

P O BOX 1951

City

CHEYENNE

State

WY

ZIP Code

82003-1951

Original Amount of Loan

4,500.00

Cumulative Payment To Date

4,500.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

02/05/2014

Date Due

NO DUE DATE

Interest Rate

0.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 30 OF 40

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
P.O. BOX 1951

City State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
9,500.00	0.00	9,500.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	02/14/2014	NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269149

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

PO BOX 1951

City

CHEYENNE

State

WY

ZIP Code

82003-1951

Original Amount of Loan

250.00

Cumulative Payment To Date

250.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

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

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

201510160200269150

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

PO BOX 1951

City State ZIP Code

CHEYENNE WY 82003-1951

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

3,500.00

3,500.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

04/16/2014

NO DUE DATE

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269151

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

P.O. BOX 1951

City State ZIP Code

CHEYENNE WY 82003-1951

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

1,500.00 1,500.00 0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

04/21/2014 NO DUE DATE 0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 34 OF 40

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES E / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 1951

City State ZIP Code
@ HEYERNE WV 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
,900.00	0.00	,900.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M / D D / Y Y Y Y 04 / 25 / 2014	M M / D D / Y Y Y Y NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269153

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES E / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▾

Mailing Address
P.O. BOX 1951

City State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan 1,000.00	Cumulative Payment To Date 1,000.00	Balance Outstanding at Close of This Period 0.00
--	---	--

TERMS

Date Incurred 05' 01' 2014	Date Due NO DUE DATE	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------------------------------	--------------------------------	--------------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269154

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U. S SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES E / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 1951

City State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,000.00	0.00	1,000.00

TERMS Date Incurred Date Due Interest Rate Secured:
05/02/2014 NO DUE DATE 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269155

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 37 OF 40

FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES E / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
P.O. BOX 1951

City State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3,400.00	0.00	3,400.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05/23/2014	NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

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

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

201510160200269156

SCHEDULE C (FEC Form 3)
LOANS

PAGE 38 OF 40
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)
HARDY, CHARLES E / PERSONAL FUNDS

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
P O BOX 1951

City State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
350.00	0.00	350.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06/05/2014	NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

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

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

201510160200269157

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)

HARDY, CHARLES E / PERSONAL FUNDS

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

P.O. BOX 1951

City

CHEYENNE

State

WY

ZIP Code

82003-1951

Original Amount of Loan

2,500.00

Cumulative Payment To Date

000

Balance Outstanding at Close of This Period

2,500.00

TERMS

Date Incurred

06/27/2014

Date Due

NO DUE DATE

Interest Rate

0.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

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

17,650.00

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

201510160200269158

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR U.S. SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RAW IMAGE

Nature of Debt (Purpose):

CAMPAIGN VIDEOS AND WEBSITE DEVELOPMENT

Mailing Address

525 HAMPTON LANE

City

State

Zip Code

KEY BISCAIYNE FL 33149

Outstanding Balance Beginning This Period

2462.09

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2462.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AMERICAN EXPRESS

Nature of Debt (Purpose):

Mailing Address

P.O. BOX 297812

City

State

Zip Code

FT. LAUDERDALE FL 33329

Outstanding Balance Beginning This Period

16595.58

Amount Incurred This Period

4072.7

Payment This Period

11204.9

Outstanding Balance at Close of This Period

15882.36

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) ...

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) ...

18344.45

17650.00

35994.45

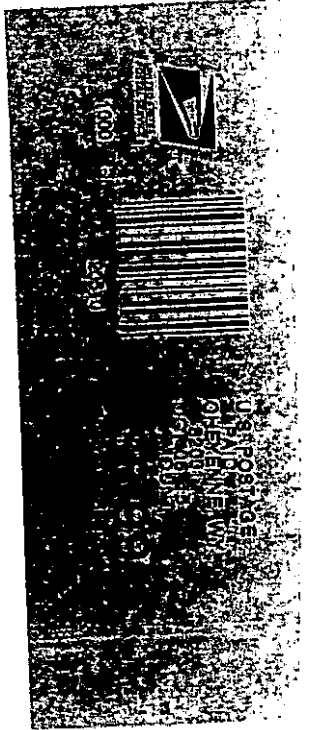
FIRST CLASS

FDLIE HARRY FOR HIS SEWART
BOX 1223
P. O. BOX 1223, WY 82003

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS TO ELIGIBLE FOR LIVE
CERTIFIED MAIL



7015 0640 0002 3102 1129



First Class Mail

OCT 13 1979
Senators Post Office
Screened Mail

Screened by
Senators Post Office
OCT 13 1979

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, D.C. 20510-7116

091692002091015102

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED 10/6/15
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

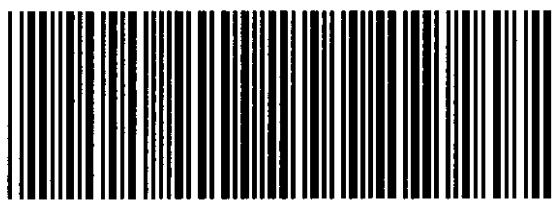
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

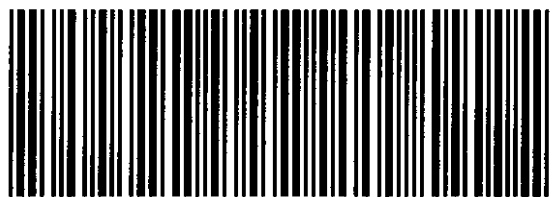
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-15-15

201510160200269161



SEN PATCH



SEN PATCH

201510160200269162