

 **CHRIS
MCDANIEL**

UNITED STATES SENATE

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

14 FEB -4 AM 11:14

January 31, 2014

Federal Election Commission
Secretary of the Senate
Office of Public Records
Post Office Box 77578
Washington, DC 20013-7578

Dear Secretary of the Senate:

Re: Committee ID C00550657 and Candidate ID S4MS00120

Please find enclosed our first Quarterly FEC Report for Friends of Chris McDaniel. Please use the above listed identification numbers for your identification reference. Unfortunately, upon compilation of our report, we began to notice a discrepancy between our financial software and the numbers provided to us by Trailblazer, our database vendor. We have spent several days working with Trailblazer attempting to rectify the inconsistencies, but have been unable to achieve a balanced report. Upon viewing the report, you will clearly see there are duplicate contributions. Although the balances and deposits are correct, we are aware of the reported duplicate contributions and will have an amended report submitted to you as soon as possible.

We are submitting this report knowing that it contains duplicates, but we are attaching this cover letter to explain the situation.

Sincerely,



Dawn Walters
Assistant Treasurer

Enclosure

DW/lw

14020104121

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Chris McDaniel

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 10 01 2013 To: ^{M M / D D / Y Y Y Y} 12 31 2013

	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)).....	461279	461279
(b) Total Contribution Refunds (from Line 20(d)) .....	.	.
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	461279	461279
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	170399.02	170399.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	.	.
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	170399.02	170399.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	390794.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	.
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	100000	

For further information contact:

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

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

14020104123

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of Chris McDaniel

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2013 To: MM / DD / YYYY 12 / 31 / 2013

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)	316858	316858
(ii) Unitemized	129421	129421
(iii) TOTAL of contributions from individuals	446279	446279
(b) Political Party Committees .....	.	.
(c) Other Political Committees (such as PACs)	15000	15000
(d) The Candidate .....	.	.
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	461279	461279
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate	100000	100000
(b) All Other Loans .....	.	.
(c) TOTAL LOANS (add Lines 13(a) and (b))	100000	100000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	561279	561279

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	170399.02	170399.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.	.
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.	.
(b) Of All Other Loans .....	.	.
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.	.
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	.	.
(b) Political Party Committees.....	.	.
(c) Other Political Committees (such as PACs) .....	.	.
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	.	.
21. OTHER DISBURSEMENTS	185.87	185.87
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	170584.89	170584.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	100
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	561279
25. SUBTOTAL (add Line 23 and Line 24).....	561379
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	170584.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	390794.11

14020104125

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 166
	<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)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ken Abramowitz		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address P.O. Box 958		Transaction ID : SA11Ai-CN2766
City Southport	State CT		Zip Code 06890
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Managing Partner	Occupation NGN Capital	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Robert Abrams		Date of Receipt M M / D D / Y Y Y Y 12 20 2013
Mailing Address P.O. Box 659		Transaction ID : SA11Ai-CN5436
City North Salem	State NY		Zip Code 10560-0659
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Abeville Press	Occupation Book Publisher	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 12 20 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5503
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 250
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 34747	

SUBTOTAL of Receipts This Page (optional).....	, , 750.00
TOTAL This Period (last page this line number only).....	, , *

14020104126

**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 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Robert Abrams		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address P.O. Box 659		Transaction ID : SA11Ai-CN6193
City	State Zip Code	
North Salem	NY 10560-0659	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
Abeville Press	Book Publisher	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	250

Full Name (Last, First, Middle Initial) B. Mr. George Adcock		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address P.O. Box 271		Transaction ID : SA11Ai-CN2049
City	State Zip Code	
Ellisville	MS 39437	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

Full Name (Last, First, Middle Initial) C. Mr. William Alexander		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address P.O. Box 507		Transaction ID : SA11Ai-CN2057
City	State Zip Code	
Bay Springs	MS 39422	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	1000

SUBTOTAL of Receipts This Page (optional).....	, , 1750.00
TOTAL This Period (last page this line number only).....	, , *

14020104127

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 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Kerry Allen		Date of Receipt M M / D D / Y Y Y Y 12 30 / 2013
Mailing Address 9 Lake Hope Lane		Transaction ID : SA11Ai-CN2056
City Laurel	State MS	Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Mr. Duane Alton		Date of Receipt M M / D D / Y Y Y Y 10 18 / 2013
Mailing Address 712 N Lancashire Ln.		Transaction ID : SA11Ai-CN5895
City Liberty Lake	State WA	Zip Code 99019-8531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325	

Full Name (Last, First, Middle Initial) Mr. Duane Alton		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address 712 N Lancashire Ln.		Transaction ID : SA11Ai-CN229
City Liberty Lake	State WA	Zip Code 99019-8531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650	

SUBTOTAL of Receipts This Page (optional).....	1650.00
TOTAL This Period (last page this line number only).....	

14020104128

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Club for Growth Pac Candidate Contributions Full Name (Last, First, Middle Initial) Mailing Address 2001 L St. NW Ste. 600 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. C C00432260 Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date , , 9813		Date of Receipt M M / D D / Y Y Y Y 10 25 2013 Transaction ID : SA11C-CN247 Amount of Each Receipt this Period , , 325 Earmarked contribution-Duane Alton [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
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B. Jacquelyne W. Barnett Full Name (Last, First, Middle Initial) Mailing Address 600 E Holly St. City Ellisville State MS Zip Code 39437 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date , , 2000		Date of Receipt M M / D D / Y Y Y Y 12 31 2013 Transaction ID : SA11Ai-CN5715 Amount of Each Receipt this Period , , 2000
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C. Susan Barnett Full Name (Last, First, Middle Initial) Mailing Address 351 Old HWY 15 S City Ellisville State MS Zip Code 39437 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date , , 1000		Date of Receipt M M / D D / Y Y Y Y 12 30 2013 Transaction ID : SA11Ai-CN5711 Amount of Each Receipt this Period , , 1000
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SUBTOTAL of Receipts This Page (optional).....	, , 3000.00
TOTAL This Period (last page this line number only).....	, ,

14020104129

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Deidra J. Bassi		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
A. Mailing Address 541 N 6th Ave.		Transaction ID : SA11Ai-CN5727
City Laurel	State MS	Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) Bruce Baumgarn		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
B. Mailing Address 2404 Northeast Park Drive		Transaction ID : SA11Ai-CN5789
City Grimes	State IA	Zip Code 50111-4839
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer self	Occupation Management Consultant/ Private Equity	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Bruce Baumgarn		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
C. Mailing Address 2404 Northeast Park Drive		Transaction ID : SA11Ai-CN6014
City Grimes	State IA	Zip Code 50111-4839
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer self	Occupation Management Consultant/ Private Equity	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

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

14020104130

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Bryan Beech		Date of Receipt M M / D D / Y Y Y Y 12 30 2013
Mailing Address 53 Grayson Beech Rd		Transaction ID : SA11Ai-CN2761
City Ellisville	State MS	Zip Code 39437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Myrick A/G	Occupation Pastor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	250

Full Name (Last, First, Middle Initial) B. Mr. Charles Bell		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 43 Red Hinton Rd.		Transaction ID : SA11Ai-CN2061
City SoSo	State MS	Zip Code 39480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Peco Foods	Occupation Plant Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

Full Name (Last, First, Middle Initial) C. Fred Benton		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 8818 Stable Crest Blvd		Transaction ID : SA11Ai-CN4136
City Houston	State TX	Zip Code 77024-7034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer SELF	Occupation INVESTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	250

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

14020104131

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

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

FOR LINE NUMBER: PAGE 11 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Kenneth Berger

Mailing Address 6229 Majorca Circle

City State Zip Code
Long Beach CA 90803-4814

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

Name of Employer Occupation
n.a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 03 2013

Transaction ID : SA11AI-CN6108

Amount of Each Receipt this Period
300

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

Mailing Address 12519 Westmere Dr

City State Zip Code
Houston TX 77077-3927

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

Name of Employer Occupation
EXXONMOBIL GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 09 2013

Transaction ID : SA11AI-CN4993

Amount of Each Receipt this Period
100

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

Mailing Address 105 Marland Rd S

City State Zip Code
Colorado Springs CO 80906-4350

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

Name of Employer Occupation
M J BOGOSIAN & CO VP & COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 21 2013

Transaction ID : SA11AI-CN1705

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional)..... 900.00

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

14020104132

**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 12 OF 166
	<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)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Martin Boles		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 333 South Hope Street Suite 3000		Transaction ID : SA11Ai-CN5745
City Los Angeles	State CA		Zip Code 90071-3039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Kirkland & Ellis		, , 250
Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 250
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) B. Martin Boles		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 333 South Hope Street Suite 3000		Transaction ID : SA11Ai-CN5835
City Los Angeles	State CA		Zip Code 90071-3039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Kirkland & Ellis		, , 250
Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 500
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C. Martin Boles		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 333 South Hope Street Suite 3000		Transaction ID : SA11Ai-CN6160
City Los Angeles	State CA		Zip Code 90071-3039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Kirkland & Ellis		, , 250
Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 250
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	, , 750.00
TOTAL This Period (last page this line number only).....	, , .

14020104133

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Joel Bomgaars			Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 357 Kiowa Drive			Transaction ID : SA11Ai-CN132
City Madison	State MS	Zip Code 39110	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000
Name of Employer		Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Ms. Tara Booth			Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address PO Box 495			Transaction ID : SA11Ai-CN12
City Jackson	State MS	Zip Code 39205	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250
Name of Employer State of Mississippi		Occupation Spokesperson	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Mr. Michael L. Bostic			Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 111 Wisteria Hill Drive			Transaction ID : SA11Ai-CN161
City Flowood	State MS	Zip Code 39232	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2500
Name of Employer		Occupation Retired	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

14020104134

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Mr. Paul Breed			Date of Receipt M M / D D / Y Y Y Y 10 18 2013	
Mailing Address 712 E Solana Cir			Transaction ID : SA11Ai-CN704	
City Solana Beach	State CA	Zip Code 92075-2356	Amount of Each Receipt this Period , , 500	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 500	
Name of Employer NETBURNER		Occupation ENGINEER	Amount of Each Receipt this Period , , 500	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 500	Amount of Each Receipt this Period , , 500	

B. Full Name (Last, First, Middle Initial) Senate Conservatives Fund			Date of Receipt M M / D D / Y Y Y Y 10 18 2013	
Mailing Address 228 S. Washington St. #115			Transaction ID : SA11C-CN744	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period , , 500	
FEC ID number of contributing federal political committee. C C00448696			Amount of Each Receipt this Period , , 500	
Name of Employer		Occupation	Earmarked contribution-Paul Breed [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 926	Amount of Each Receipt this Period , , 926	

C. Full Name (Last, First, Middle Initial) Mr. George Bridges			Date of Receipt M M / D D / Y Y Y Y 11 18 2013	
Mailing Address 40 Smith Holfield Rd.			Transaction ID : SA11Ai-CN180	
City Laurel	State MS	Zip Code 39443	Amount of Each Receipt this Period , , 2600	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 2600	
Name of Employer		Occupation	Amount of Each Receipt this Period , , 2600	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 2600	Amount of Each Receipt this Period , , 2600	

SUBTOTAL of Receipts This Page (optional).....	, , 3100.00
TOTAL This Period (last page this line number only).....	, ,

14020104135

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

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

FOR LINE NUMBER: PAGE 15 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ms. Sue Bridges		Date of Receipt M M / D D / Y Y Y Y 11 18 / 2013	
Mailing Address 40 Smith Holifield Rd.		Transaction ID : SA11AI-CN181	
City State Zip Code Laurel MS 39443	Amount of Each Receipt this Period , , 2600		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2600	
Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2600		
Full Name (Last, First, Middle Initial) B. Renton Brodie		Date of Receipt M M / D D / Y Y Y Y 12 03 / 2013	
Mailing Address P.O. Box 96		Transaction ID : SA11AI-CN6109	
City State Zip Code Union Pier MI 49129	Amount of Each Receipt this Period , , 2500		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2500	
Name of Employer Occupation n.a. Retired	Election Cycle-to-Date , , 2500		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2500		
Full Name (Last, First, Middle Initial) C. Barbara Brown		Date of Receipt M M / D D / Y Y Y Y 12 12 / 2013	
Mailing Address P.O. Box 114		Transaction ID : SA11AI-CN5723	
City State Zip Code Bay Springs MS 39422-0114	Amount of Each Receipt this Period , , 2500		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2500	
Name of Employer Occupation Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2500		
SUBTOTAL of Receipts This Page (optional).....		, , 7600.00	
TOTAL This Period (last page this line number only).....		, ,	

14020104136

**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 16 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Thomas E. Brown		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address P.O. Box 114		Transaction ID : SA11AI-CN5721
City Bay Springs	State MS	Zip Code 39422-0114
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period , , 2500	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2500	

Full Name (Last, First, Middle Initial) B. Dave Brownell		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 8345 NW 66th St # A7741		Transaction ID : SA11AI-CN1981
City Miami	State FL	Zip Code 33166-2626
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period , , 1000	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000	

Full Name (Last, First, Middle Initial) C. William S. Burton		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 25 Northgate Dr.		Transaction ID : SA11AI-CN5484
City Laurel	State MS	Zip Code 39440
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period , , 2000	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2000	

SUBTOTAL of Receipts This Page (optional).....	, , 5500.00
TOTAL This Period (last page this line number only).....	, , .

14020104137

**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 17 OF 166	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Charlotte Cahill		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 63 Craven Dr.		Transaction ID : SA11AI-CN5476
City	State Zip Code Soso MS 39480	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		2600
, , *		

Full Name (Last, First, Middle Initial) B. Ms. Janet Carter		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address P.O. Box 87		Transaction ID : SA11AI-CN237
City	State Zip Code Cisco TX 76437-0087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer	Occupation n/a HOMEMAKER	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		400
, , *		

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN251
City	State Zip Code Washington DC 20036	
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 200
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		10290
, , *		

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

14020104138

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) James Causley		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
A. Mailing Address 3333 Gulf Shore Boulevard North Ap City: Naples State: FL Zip Code: 34103-3665		Transaction ID : SA11Ai-CN5430
FEC ID number of contributing federal political committee. C	Occupation	Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
B. Mailing Address 2001 L St. NW Ste. 600 City: Washington State: DC Zip Code: 20036		Transaction ID : SA11C-CN5497
FEC ID number of contributing federal political committee. C C00432260	Occupation	Amount of Each Receipt this Period 1000
Name of Employer	Occupation	Earmarked contribution-James Causley
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 34172	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) James Causley		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
C. Mailing Address 3333 Gulf Shore Boulevard North Ap City: Naples State: FL Zip Code: 34103-3665		Transaction ID : SA11Ai-CN6187
FEC ID number of contributing federal political committee. C	Occupation	Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

14020104139

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 19 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Elloine Clark		Date of Receipt M M / D D / Y Y Y Y 12 26 2013
Mailing Address 3716 Maplewood Avenue		Transaction ID : SA11AI-CN1276
City Dallas	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Homemaker	Occupation Homemaker	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Mr. Charles S. Cohn		Date of Receipt M M / D D / Y Y Y Y 10 18 2013
Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11AI-CN5911
City Granite Bay	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Mr. Charles S. Cohn		Date of Receipt M M / D D / Y Y Y Y 10 28 2013
Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11AI-CN289
City Granite Bay	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	, , *	3100.00
TOTAL This Period (last page this line number only).....	, , *	

14020104140

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 20 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Club for Growth Pac Candidate Contributions

Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10765

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11C-CN290

Amount of Each Receipt this Period
250

Earmarked contribution-Charles Cohn

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

B. Mr. Charles S. Cohn

Full Name (Last, First, Middle Initial)
Mr. Charles S. Cohn

Mailing Address 9936 Villa Granito Lane

City Granite Bay State CA Zip Code 95746-6482

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

Name of Employer Occupation
Wells Fargo Advisors Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
M M / D D / Y Y Y Y
11 / 24 / 2013

Transaction ID : SA11Ai-CN5993

Amount of Each Receipt this Period
250

C. Mr. Charles S. Cohn

Full Name (Last, First, Middle Initial)
Mr. Charles S. Cohn

Mailing Address 9936 Villa Granito Lane

City Granite Bay State CA Zip Code 95746-6482

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

Name of Employer Occupation
Wells Fargo Advisors Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
12 / 12 / 2013

Transaction ID : SA11Ai-CN6169

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

14020104141

**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 21 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Charles Cohn		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11Ai-CN5338
City Granite Bay	State CA		Zip Code 95746-6482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) B. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5673
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 250
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3055	
		Earmarked contribution-Charles Cohn [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) C. Charles Cohn		Date of Receipt M M / D D / Y Y Y Y 11 27 2013
Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11Ai-CN5420
City Granite Bay	State CA		Zip Code 95746-6482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	, , *	500.00
TOTAL This Period (last page this line number only).....	, , *	

14020104142

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2013
A. Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5672
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period , , *
Name of Employer	Occupation	250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Earmarked contribution-Charles Cohn
Election Cycle-to-Date , , 32494		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) Charles Cohn		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
B. Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11Ai-CN5755
City Granite Bay	State CA	Zip Code 95746-6482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , *
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 750

Full Name (Last, First, Middle Initial) Charles Cohn		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
C. Mailing Address 9936 Villa Granito Lane		Transaction ID : SA11Ai-CN5846
City Granite Bay	State CA	Zip Code 95746-6482
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , *
Name of Employer Wells Fargo Advisors	Occupation Financial Advisor	250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1000

SUBTOTAL of Receipts This Page (optional).....	, , *	500.00
TOTAL This Period (last page this line number only).....	, , *	

14020104143

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

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

Mailing Address
P.O. Box 1369

City Meredith State NH Zip Code 03253-1369

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

Name of Employer Air Horizons LLC Occupation Sales Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : **SA11AI-CN5441**

Amount of Each Receipt this Period
400

B. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2013

Transaction ID : **SA11C-CN5508**

Amount of Each Receipt this Period
400

Earmarked contribution-Stephen Conkling

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
Mr. Richard Conrad

Mailing Address P.O. Box 4164

City Laurel State MS Zip Code 39440

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

Name of Employer Sanderson Farms Inc. Occupation Staff Auditor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2013

Transaction ID : **SA11AI-CN18**

Amount of Each Receipt this Period
500

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

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

900.00

14020104144

**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 24 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Richard Conrad		Date of Receipt M M / D D / Y Y Y Y 12 21 2013
Mailing Address P.O. Box 4164		Transaction ID : SA11AI-CN5732
City State Zip Code Laurel MS 39440	Amount of Each Receipt this Period , , 500	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1000
Name of Employer Sanderson Farms Inc.	Occupation Staff Auditor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. Mr. Richard Conrad		Date of Receipt M M / D D / Y Y Y Y 12 30 2013
Mailing Address P.O. Box 4164		Transaction ID : SA11AI-CN2033
City State Zip Code Laurel MS 39440	Amount of Each Receipt this Period , , 25	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1025
Name of Employer Sanderson Farms Inc.	Occupation Staff Auditor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. Bobbie Cook		Date of Receipt M M / D D / Y Y Y Y 11 25 2013
Mailing Address 15279 N Scottsdale Rd Ste 400		Transaction ID : SA11AI-CN1531
City State Zip Code Scottsdale AZ 85254-2659	Amount of Each Receipt this Period , , 250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250
Name of Employer SUPERIOR	Occupation ADMIN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	, , 775.00
TOTAL This Period (last page this line number only).....	, ,

14020104145

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 OF 166

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
William Cook

Mailing Address
28431 Rochester Court

City **Bonita Springs** State **FL** Zip Code **34135-3454**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 04 / 2013

Transaction ID : **SA11Ai-CN5774**

Amount of Each Receipt this Period
500

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

Mailing Address **28431 Rochester Court**

City **Bonita Springs** State **FL** Zip Code **34135-3454**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 04 / 2013

Transaction ID : **SA11Ai-CN5999**

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Anita G. Coughlin

Mailing Address **723 Fairway Trail**

City **Hernando** State **MS** Zip Code **38632**

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

Name of Employer Occupation
Retired N/A

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 05 / 2013

Transaction ID : **SA11Ai-CN115**

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only)

14020104146

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Anita Court			Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 171 Hermitage Circle			Transaction ID : SA11Ai-CN6145
City Ligonier	State PA	Zip Code 15658-2419	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer N/A	Occupation retired		1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	1000

Full Name (Last, First, Middle Initial) Anita Court			Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 171 Hermitage Circle			Transaction ID : SA11Ai-CN5697
City Ligonier	State PA	Zip Code 15658-2419	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer N/A	Occupation retired		1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2000

Full Name (Last, First, Middle Initial) Anita Court			Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 171 Hermitage Circle			Transaction ID : SA11Ai-CN5820
City Ligonier	State PA	Zip Code 15658-2419	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer N/A	Occupation retired		1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	1000

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

14020104147

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 166
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Steven Cowles			Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013		
Mailing Address 6212 Elati Ct			Transaction ID : SA11AI-CN1736		
City Alexandria	State VA	Zip Code 22310-1646	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			, , *		
Name of Employer COWLES FORD INC		Occupation AUTO DEALER	250		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , *		
			250		

Full Name (Last, First, Middle Initial) Steven Cowles			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013		
Mailing Address 6212 Elati Ct			Transaction ID : SA11AI-CN3853		
City Alexandria	State VA	Zip Code 22310-1646	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			, , *		
Name of Employer COWLES FORD INC		Occupation AUTO DEALER	747		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , *		
			997		

Full Name (Last, First, Middle Initial) Mr. Thomas Crabtree			Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2013		
Mailing Address 7859 Twin Ridge Dr			Transaction ID : SA11AI-CN4422		
City Glen Burnie	State MD	Zip Code 21061-4234	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. C			, , *		
Name of Employer RETIRED		Occupation RETIRED	50		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , *		
			250		

SUBTOTAL of Receipts This Page (optional).....	, , *	1047.00
TOTAL This Period (last page this line number only).....	, , *	

14020104148

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Joe Crail			Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address 2172 Dupont Dr Ste 230			Transaction ID : SA11AI-CN2204	
City	State	Zip Code	Amount of Each Receipt this Period	
Irvine	CA	92612-1359	, , 1000	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer WESTERN MUTUAL		Occupation EXEC	, , 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 1000	
B. Full Name (Last, First, Middle Initial) Michael Cranny			Date of Receipt M M / D D / Y Y Y Y 11 25 2013	
Mailing Address PO Box 1398			Transaction ID : SA11AI-CN1535	
City	State	Zip Code	Amount of Each Receipt this Period	
Dakota Dunes	SD	57049-1398	, , 250	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer RETIRED		Occupation RETIRED	, , 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250	
C. Full Name (Last, First, Middle Initial) Joseph Crescio			Date of Receipt M M / D D / Y Y Y Y 11 13 2013	
Mailing Address 8785 S Tropical Trl			Transaction ID : SA11AI-CN1982	
City	State	Zip Code	Amount of Each Receipt this Period	
Merritt Island	FL	32952-6811	, , 1000	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer RETIRED		Occupation RETIRED	, , 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 1000	
SUBTOTAL of Receipts This Page (optional).....			, , 2250.00	
TOTAL This Period (last page this line number only).....			, ,	

14020104149

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Philip Crowley		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013
A. Mailing Address 12 Carriage Hill Drive City Far Hills State NJ Zip Code 07931-2217		Transaction ID : SA11Ai-CN5389
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 1000
Name of Employer Johnson & Johnson	Occupation lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 1000	

Full Name (Last, First, Middle Initial) Philip Crowley		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
B. Mailing Address 12 Carriage Hill Drive City Far Hills State NJ Zip Code 07931-2217		Transaction ID : SA11Ai-CN5883
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 1000
Name of Employer Johnson & Johnson	Occupation lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 1000	

Full Name (Last, First, Middle Initial) Mr. Phillip P. Crowley		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
C. Mailing Address 12 Carriage Hill Drive City Far Hills State NJ Zip Code 07931-2217		Transaction ID : SA11Ai-CN183
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 1000
Name of Employer Johnson & Johnson	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 1000	

SUBTOTAL of Receipts This Page (optional).....	\$, , 3000.00
TOTAL This Period (last page this line number only).....	\$, , .

14020104150

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 4055

Date of Receipt
M M / D D / Y Y Y Y
10 25 2013

Transaction ID : SA11C-CN254

Amount of Each Receipt this Period
 , , 1000
 Earmarked contribution-Phillip Crowley

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
Mr. Don Crump

Mailing Address 1982 State Highway 207

City Ralls State TX Zip Code 79357-5216

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

Name of Employer Occupation
SELF FARMER-RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 250

Date of Receipt
M M / D D / Y Y Y Y
10 24 2013

Transaction ID : SA11A-CN840

Amount of Each Receipt this Period
 , , 250

C. Full Name (Last, First, Middle Initial)
Senate Conservatives Fund

Mailing Address 228 S. Washington St. #115

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 4055

Date of Receipt
M M / D D / Y Y Y Y
10 24 2013

Transaction ID : SA11C-CN1188

Amount of Each Receipt this Period
 , , 250
 Earmarked contribution-Don Crump

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

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

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

, , 250.00

, ,

14020104151

**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 31 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Donald Daniel		Date of Receipt M M / D D / Y Y Y Y 12 30 2013
Mailing Address 1441 Haynes Dr		Transaction ID : SA11Ai-CN3808
City Murfreesboro	State TN		Zip Code 37129-1018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer NATIONAL HEALTH CORPORATION	Occupation ACCOUNTANT	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. Richard Davis		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 7885 Saddlebrook Drive		Transaction ID : SA11Ai-CN6041
City Port Saint Lucie	State FL		Zip Code 34986-3131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Richard K. Davis Construction Corp. (	Occupation Retired - Construction	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. Roger Davis		Date of Receipt M M / D D / Y Y Y Y 12 19 2013
Mailing Address 800 Woodlands Parkway Suite 201		Transaction ID : SA11Ai-CN5717
City Ridgeland	State MS		Zip Code 39157
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

14020104152

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 32 OF 166
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Michael Deharde		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 25852 Highway 43		Transaction ID : SA11Ai-CN848
City Picayune	State MS	
Zip Code 39466-9667		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer U.S FORENSIC	Occupation ENGINEER	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN1213
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C C00448696		
Name of Employer	Occupation	, , . Earmarked contribution-Michael Deharde
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4567	

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) Mr. Edwin Devilbiss		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 38 Spartina Point Dr		Transaction ID : SA11Ai-CN1748
City Hilton Head	State SC	
Zip Code 29926-1077		Amount of Each Receipt this Period 200
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

SUBTOTAL of Receipts This Page (optional).....	, , .	450.00
TOTAL This Period (last page this line number only).....	, , .	

14020104153

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 33 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Sharon Dimit			Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013		
Mailing Address 13215 Ernst Rd			Transaction ID : SA11Ai-CN5029		
City	State	Zip Code	Amount of Each Receipt this Period		
Roanoke	IN	46783-8726	, , 250		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period		
Name of Employer RETIRED		Occupation RETIRED	, , 250		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250		

B. Full Name (Last, First, Middle Initial) Mr. Andy Divine Sr			Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013		
Mailing Address P.O. Box 300			Transaction ID : SA11Ai-CN169		
City	State	Zip Code	Amount of Each Receipt this Period		
Sharon	MS	39163	, , 250		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period		
Name of Employer Canton Fire Dept.		Occupation Firefighter	, , 250		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250		

C. Full Name (Last, First, Middle Initial) Mr. Andy Divine Sr			Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013		
Mailing Address P.O. Box 300			Transaction ID : SA11Ai-CN2046		
City	State	Zip Code	Amount of Each Receipt this Period		
Sharon	MS	39163	, , 150		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period		
Name of Employer Canton Fire Dept.		Occupation Firefighter	, , 400		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 400		

SUBTOTAL of Receipts This Page (optional).....	, , 650.00
TOTAL This Period (last page this line number only).....	, ,

14020104154

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 34 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Randall Doerter		Date of Receipt M M / D D / Y Y Y Y 12 18 / 2013	
Mailing Address PO Box 681694		Transaction ID : SA11AI-CN2236	
City Franklin	State TN	Zip Code 37068-1694	Amount of Each Receipt this Period , , 100
FEC ID number of contributing federal political committee. C			
Name of Employer WOOD & HYDE LEATHER	Occupation MANAGEMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 300		

Full Name (Last, First, Middle Initial) B. Joan Dupont		Date of Receipt M M / D D / Y Y Y Y 11 27 / 2013	
Mailing Address 303 Hulls Farm Road		Transaction ID : SA11AI-CN5418	
City Southport	State CT	Zip Code 06890-3002	Amount of Each Receipt this Period , , 300
FEC ID number of contributing federal political committee. C			
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 300		

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 27 / 2013	
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5669	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period , , 300 Earmarked contribution-Joan Dupont [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
FEC ID number of contributing federal political committee. C C00432260			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 31144		

SUBTOTAL of Receipts This Page (optional).....	, , 400.00
TOTAL This Period (last page this line number only).....	, ,

14020104155

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 35 OF 166	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Joan Dupont		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 303 Hulls Farm Road		Transaction ID : SA11Ai-CN5991	
City Southport	State CT	Zip Code 06890-3002	Amount of Each Receipt this Period , , 300
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 300	
Name of Employer n/a	Occupation retired	Amount of Each Receipt this Period , , 300	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 300	

B. Full Name (Last, First, Middle Initial) Mr. Roger Easterling		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013	
Mailing Address 9673 HWY 42		Transaction ID : SA11Ai-CN133	
City Richton	State MS	Zip Code 39476	Amount of Each Receipt this Period , , 250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250	
Name of Employer	Occupation	Amount of Each Receipt this Period , , 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 250	

C. Full Name (Last, First, Middle Initial) James Edwards		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 801 South Garner Street		Transaction ID : SA11Ai-CN531	
City State College	State PA	Zip Code 16801	Amount of Each Receipt this Period , , 1000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1000	
Name of Employer Self	Occupation Physician	Amount of Each Receipt this Period , , 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1000	

SUBTOTAL of Receipts This Page (optional).....	, , 1550.00
TOTAL This Period (last page this line number only).....	, ,

14020104156

**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 36 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Christopher Ekstrom		Date of Receipt M M / D D / Y Y Y Y 11 22 2013
Mailing Address 1525 NW 121st Dr.		Transaction ID : SA11AI-CN5523
City State Zip Code Corn Springs FL 33071	Amount of Each Receipt this Period , , 3500	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 3500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 3500	

Full Name (Last, First, Middle Initial) B. Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 11 22 2013
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN5524
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period , , 3500	
FEC ID number of contributing federal political committee. C C00448696		Amount of Each Receipt this Period , , 3500 Earmarked-Christopher Ekstrom [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 24956	

Full Name (Last, First, Middle Initial) C. Ceferino Fajardo		Date of Receipt M M / D D / Y Y Y Y 11 04 2013
Mailing Address 14735 Via Bettona		Transaction ID : SA11AI-CN106
City State Zip Code San Diego CA 92127	Amount of Each Receipt this Period , , 250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 250	

SUBTOTAL of Receipts This Page (optional).....	, , 3750.00
TOTAL This Period (last page this line number only).....	, , .

14020104157

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Lawrence Fargher			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 830 Kiely Blvd Ste 200			Transaction ID : SA11Ai-CN4318
City Santa Clara	State CA	Zip Code 95051-5373	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer REALCOM ASSOCIATES(SELF)		Occupation REALTOR	, , 100
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 300

Full Name (Last, First, Middle Initial) Jay Fenton			Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 207 South 13th Avenue			Transaction ID : SA11Ai-CN5481
City Laurel	State MS	Zip Code 39440	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer		Occupation	, , 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 2600

Full Name (Last, First, Middle Initial) Ms. Pearl Follman			Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address PO Box 191223			Transaction ID : SA11Ai-CN881
City Brooklyn	State NY	Zip Code 11219-7223	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer FOLLMAN		Occupation BROKER	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250

SUBTOTAL of Receipts This Page (optional)	, , 2950.00
TOTAL This Period (last page this line number only)	, ,

14020104158

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 38 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Senate Conservatives Fund

Mailing Address 228 S. Washington St. #115

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5703

Date of Receipt
M M / D D / Y Y Y Y
10 24 2013

Transaction ID : **SA11C-CN1248**

Amount of Each Receipt this Period
250

Earmarked contribution-Pearl Follman

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
Mr. Peri Follman

Mailing Address PO Box 190405

City State Zip Code
Brooklyn NY 11219-0405

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

Name of Employer Occupation
FOLLMAN BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 18 2013

Transaction ID : **SA11Ai-CN707**

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Senate Conservatives Fund

Mailing Address 228 S. Washington St. #115

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1176

Date of Receipt
M M / D D / Y Y Y Y
10 18 2013

Transaction ID : **SA11C-CN747**

Amount of Each Receipt this Period
250

Earmarked contribution-Peri Follman

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

14020104159

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 39 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Mr. Carl D Ford			Date of Receipt M M / D D / Y Y Y Y 10 15 / 2013	
Mailing Address Post Office Box 52			Transaction ID : SA11Ai-CN52	
City Laurel	State MS	Zip Code 39441	Amount of Each Receipt this Period , , 500	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 500	
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Election Cycle-to-Date , , 500		

B. Full Name (Last, First, Middle Initial) Judy Gallagher			Date of Receipt M M / D D / Y Y Y Y 12 06 / 2013	
Mailing Address 2414 Westmoreland Road			Transaction ID : SA11Ai-CN528	
City Red Oak	State TX	Zip Code 75154	Amount of Each Receipt this Period , , 1000	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 1000	
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Election Cycle-to-Date , , 1000		

C. Full Name (Last, First, Middle Initial) Mr. James Gambrell			Date of Receipt M M / D D / Y Y Y Y 12 12 / 2013	
Mailing Address 171 County Road 713			Transaction ID : SA11Ai-CN5463	
City Stringer	State MS	Zip Code 39481-4626	Amount of Each Receipt this Period , , 100	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 300	
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Election Cycle-to-Date , , 300		

SUBTOTAL of Receipts This Page (optional).....	, , 1600.00
TOTAL This Period (last page this line number only).....	, ,

14020104160

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 40 OF 166
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Mr. Paul Gamst

Mailing Address 8014 Island Road

City State Zip Code
Eden Prairie MN 55347-1124

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

Name of Employer Occupation
Beard Group MGT LLC Real Estate

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
10 19 2013

Transaction ID : SA11Ai-CN5914

Amount of Each Receipt this Period
225

B. Full Name (Last, First, Middle Initial)
Mr. Paul Gamst

Mailing Address 8014 Island Road

City State Zip Code
Eden Prairie MN 55347-1124

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

Name of Employer Occupation
Beard Group MGT LLC Real Estate

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
10 28 2013

Transaction ID : SA11Ai-CN295

Amount of Each Receipt this Period
225

C. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
10 28 2013

Transaction ID : SA11C-CN296

Amount of Each Receipt this Period
225

Earmarked contribution-Paul Gamst

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

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

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

450.00

14020104161

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 41 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Paul Gamst			Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013		
Mailing Address 8014 Island Road			Transaction ID : SA11AI-CN5341		
City Eden Prairie	State MN	Zip Code 55347-1124				Amount of Each Receipt this Period , , 225
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 225		
Name of Employer Beard Group MGT LLC		Occupation Real Estate	Amount of Each Receipt this Period , , 225		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 225	Amount of Each Receipt this Period , , 225		

B. Full Name (Last, First, Middle Initial) Mr. Irvin Gatlin			Date of Receipt M M / D D / Y Y Y Y 10 17 / 2013		
Mailing Address 315 HWY 84 East			Transaction ID : SA11AI-CN54		
City Laurel	State MS	Zip Code 39443-6107				Amount of Each Receipt this Period , , 500
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 500		
Name of Employer		Occupation	Amount of Each Receipt this Period , , 500		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 500	Amount of Each Receipt this Period , , 500		

C. Full Name (Last, First, Middle Initial) Irvin Gatlin			Date of Receipt M M / D D / Y Y Y Y 12 12 / 2013		
Mailing Address 3159 HWY 84 E.			Transaction ID : SA11AI-CN5466		
City Laurel	State MS	Zip Code 39443-6107				Amount of Each Receipt this Period , , 250
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 250		
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period , , 250		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 250	Amount of Each Receipt this Period , , 250		

SUBTOTAL of Receipts This Page (optional).....			, , 975.00		
TOTAL This Period (last page this line number only).....			, ,		

14020104162

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 42 OF 166
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Irvin Gatlin		Date of Receipt M M / D D / Y Y Y Y 12 19 2013
Mailing Address 3159 HWY 84 E.		Transaction ID : SA11AI-CN1201
City Laurel	State MS	
Zip Code 39443-6107		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Robert Gay		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 1111 W 41st Ter		Transaction ID : SA11AI-CN1343
City Kansas City	State MO	
Zip Code 64111-4013		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Robert Gay		Date of Receipt M M / D D / Y Y Y Y 11 28 2013
Mailing Address 1111 W 41st Ter		Transaction ID : SA11AI-CN1562
City Kansas City	State MO	
Zip Code 64111-4013		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

14020104163

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 166
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Lawrence Gelman

Mailing Address 3900 Sundown Drive

City State Zip Code
McAllen TX 78503

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

Name of Employer Occupation
McAllen Anesthesia MD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y
12 03 2013

Transaction ID : SA11AI-CN513

Amount of Each Receipt this Period
2000

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

Mailing Address 3900 Sundown Drive

City State Zip Code
McAllen TX 78503

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

Name of Employer Occupation
McAllen Anesthesia MD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600

Date of Receipt
M M / D D / Y Y Y Y
12 30 2013

Transaction ID : SA11AI-CN2037

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Mr. Vern H. Goding

Mailing Address 648 Acacia Ave.

City State Zip Code
Melbourne Village FL 32904-2302

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
11 04 2013

Transaction ID : SA11AI-CN118

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional)..... 4850.00

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

14020104164

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 44 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Richard Graham		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 4615 North Park Drive		Transaction ID : SA11Ai-CN515
City Colorado Springs	State CO	
Zip Code 80918		Amount of Each Receipt this Period 2000
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) Windi Grimes		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 3310 West Main Street		Transaction ID : SA11Ai-CN6120
City Houston	State TX	
Zip Code 77098-1822		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer n.a	Occupation Retired	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Billy E. Hale		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 11823 Wilcrest Dr.		Transaction ID : SA11Ai-CN5330
City Houston	State TX	
Zip Code 77031-1919		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer RUBE HOLDINGS LTD	Occupation INVESTMENT BUILDER	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	, , *	4850.00
TOTAL This Period (last page this line number only).....	, , *	

14020104165

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 45 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN5545
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C C00448696		Earmarked contribution-Billy Hale
Name of Employer	Occupation	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25821	

Full Name (Last, First, Middle Initial) Juanita Hamre		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 6101 Carmel Ln SE		Transaction ID : SA11AI-CN2320
City Lacey	State WA	
Zip Code 98503-1386		Amount of Each Receipt this Period 275
FEC ID number of contributing federal political committee. C		Earmarked contribution
Name of Employer RETIRED	Occupation RETIRED	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275	

Full Name (Last, First, Middle Initial) Eugene M. Harlow		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 414 West Oak Street		Transaction ID : SA11AI-CN5713
City Laurel	State MS	
Zip Code 39440		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C		Earmarked contribution
Name of Employer Hortman Harlow Et Al	Occupation Attorney	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	2775.00
TOTAL This Period (last page this line number only).....	

14020104166

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 46 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Charles Hartman			Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1724 Southeast 13th Street			Transaction ID : SA11AI-CN5760
City Ft Lauderdale	State FL	Zip Code 33316-2216	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer Roydon Management Co.		Occupation Manager	300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	300

Full Name (Last, First, Middle Initial) Charles Hartman			Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1724 Southeast 13th Street			Transaction ID : SA11AI-CN5851
City Ft Lauderdale	State FL	Zip Code 33316-2216	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer Roydon Management Co.		Occupation Manager	300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	600

Full Name (Last, First, Middle Initial) Charles Hartman			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 1724 Southeast 13th Street			Transaction ID : SA11AI-CN6174
City Ft Lauderdale	State FL	Zip Code 33316-2216	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer Roydon Management Co.		Occupation Manager	300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	300

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

14020104167

**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 47 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Jerry Hayden
Full Name (Last, First, Middle Initial)

Mailing Address
10306 E. Calle De Las Brisas
City: Scottsdale State: AZ Zip Code: 85255-3762

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : **SA11Ai-CN5642**

Amount of Each Receipt this Period
2600

B. Club for Growth Pac Candidate Contributions
Full Name (Last, First, Middle Initial)

Mailing Address 2001 L St. NW Ste. 600
City: Washington State: DC Zip Code: 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : **SA11C-CN5652**

Amount of Each Receipt this Period
2600

Earmarked contribution-Jerry Hayden

(MEMO ITEM)
Total earmarked through conduit. PAC limit not affected.

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

Mailing Address 10306 E. Calle De Las Brisas
City: Scottsdale State: AZ Zip Code: 85255-3762

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 05 / 2013

Transaction ID : **SA11Ai-CN5971**

Amount of Each Receipt this Period
2600

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

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

5200.00

14020104168

**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 48 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ms. Marilyn Hayden		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 10306 E. Calle De Las Brisas		Transaction ID : SA11Ai-CN5944
City	State Zip Code	
Scottsdale	AZ 85255-3762	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
	Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	2600

Full Name (Last, First, Middle Initial) B. Ms. Marilyn Hayden		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 10306 E. Calle De Las Brisas		Transaction ID : SA11Ai-CN2019
City	State Zip Code	
Scottsdale	AZ 85255-3762	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
	Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	5200

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN2020
City	State Zip Code	
Washington	DC 20036	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C C00432260		, , *
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	16369

SUBTOTAL of Receipts This Page (optional).....	, , 5200.00
TOTAL This Period (last page this line number only).....	, , *

14020104169

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

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

FOR LINE NUMBER: PAGE 49 OF 166
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Carolyn Hays			Date of Receipt M M / D D : Y Y Y Y 12 / 12 : 2013
Mailing Address 3566 C R 8			Transaction ID : SA11Ai-CN5460
City Heidelberg	State MS	Zip Code 39439	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer		Occupation	, , 1000 *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 1000 *

Full Name (Last, First, Middle Initial) B. John A. Hays			Date of Receipt M M / D D : Y Y Y Y 12 / 12 : 2013
Mailing Address			Transaction ID : SA11Ai-CN5465
City	State	Zip Code	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer		Occupation	, , 250 *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250 *

Full Name (Last, First, Middle Initial) C. Leon Henderson			Date of Receipt M M / D D : Y Y Y Y 12 / 30 : 2013
Mailing Address 203 E Ave.			Transaction ID : SA11Ai-CN5725
City Ellisville	State MS	Zip Code 39437-2113	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer		Occupation	, , 500 *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 500 *

SUBTOTAL of Receipts This Page (optional).....	, , 1750.00 *
TOTAL This Period (last page this line number only).....	, , *

14020104170

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 50 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Patricia Herbold

Mailing Address
1106 108th Avenue Northeast apt. 2
City: Bellevue State: WA Zip Code: 98004-8609

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

Name of Employer: none Occupation: retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
\$, \$ 2400 .

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : SA11Ai-CN5640

Amount of Each Receipt this Period
\$, \$ 2400 .

B. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600
City: Washington State: DC Zip Code: 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
\$, \$ 23254 .

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : SA11C-CN5651

Amount of Each Receipt this Period
\$, \$ 2400 .

Earmarked contribution-Patricia Herbold

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

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

Mailing Address
1106 108th Avenue Northeast apt. 2
City: Bellevue State: WA Zip Code: 98004-8609

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

Name of Employer: none Occupation: retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
\$, \$ 5000 .

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : SA11Ai-CN5641

Amount of Each Receipt this Period
\$, \$ 2600 .

SUBTOTAL of Receipts This Page (optional).....	\$, \$ 5000.00 .
TOTAL This Period (last page this line number only).....	\$, \$.

14020104171

**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 51 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5650
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 2600
Name of Employer	Occupation	Earmarked contribution-Patricia Herbold
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20854	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) Patricia Herbold		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1106 108th Avenue Northeastapt. 2		Transaction ID : SA11AI-CN5969
City Bellevue	State WA	Zip Code 98004-8609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400
Name of Employer none	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400	

Full Name (Last, First, Middle Initial) Patricia Herbold		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1106 108th Avenue Northeastapt. 2		Transaction ID : SA11AI-CN5970
City Bellevue	State WA	Zip Code 98004-8609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer none	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000	

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

14020104172

**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 52 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ronnie Herrington		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address P.O. Box 2703		Transaction ID : SA11Ai-CN5719
City Laurel	State MS	
Zip Code 39442		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) B. Terry Hinton		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2013
Mailing Address P.O. Box 356		Transaction ID : SA11Ai-CN5459
City Ellisville	State MS	
Zip Code 39437		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) C. Mr. David A. Holder		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 12186 Carmichael Circle		Transaction ID : SA11Ai-CN325
City N Huntingdon	State PA	
Zip Code 15642-7032		Amount of Each Receipt this Period 150
FEC ID number of contributing federal political committee. C		
Name of Employer FES	Occupation Sales	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

SUBTOTAL of Receipts This Page (optional).....	, , *	5250.00
TOTAL This Period (last page this line number only).....	, , *	

14020104173

**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 53 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 28 / 2013	
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN326	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period , , 150		
FEC ID number of contributing federal political committee. C C00432260		Earmarked contribution-David Holder	
Name of Employer Occupation 	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 12304		

Full Name (Last, First, Middle Initial) B. Mr. David A. Holder		Date of Receipt M M / D D / Y Y Y Y 12 05 / 2013	
Mailing Address 12186 Carmichael Circle		Transaction ID : SA11Ai-CN6090	
City State Zip Code N Huntingdon PA 15642-7032	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FES Sales			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 550		

Full Name (Last, First, Middle Initial) C. Randall Holloway		Date of Receipt M M / D D / Y Y Y Y 12 12 / 2013	
Mailing Address 2416 North Atlantic Boulevard		Transaction ID : SA11Ai-CN1122	
City State Zip Code Fort Lauderdale FL 33305	Amount of Each Receipt this Period , , 1000		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000		

SUBTOTAL of Receipts This Page (optional).....	, , 1250.00
TOTAL This Period (last page this line number only).....	, ,

14020104174

**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 54 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Lee M. Holmes		Date of Receipt MM / DD / YYYY 10 / 28 / 2013
Mailing Address PO Box Ar		Transaction ID : SA11Ai-CN1363
City Hagatna	State GU		Zip Code 96932-7564
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer SOUTHERN MEDIA INC.		, , . 250
Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , . 250

Full Name (Last, First, Middle Initial) B. Lee M. Holmes		Date of Receipt MM / DD / YYYY 11 / 20 / 2013
Mailing Address PO Box Ar		Transaction ID : SA11Ai-CN1800
City Hagatna	State GU		Zip Code 96932-7564
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer SOUTHERN MEDIA INC.		, , . 250
Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , . 500

Full Name (Last, First, Middle Initial) C. Mr. Earl Holt		Date of Receipt MM / DD / YYYY 10 / 22 / 2013
Mailing Address 1703 Clarendon		Transaction ID : SA11Ai-CN26
City Longview	State TX		Zip Code 75601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer self		, , . 500
Occupation slumlord		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , . 500

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

14020104175

**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 55 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Ms. Sharon J Honea		Date of Receipt M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address 3306 Lower Glading Road		Transaction ID : SA11Ai-CN50
City Magnolia	State MS	
Zip Code 39652-9443		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
500		

Full Name (Last, First, Middle Initial) Terry Huchton		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 11 Baronial Cir		Transaction ID : SA11Ai-CN4010
City The Woodlands	State TX	
Zip Code 77382-5802		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		, , *
Name of Employer MAEQUETTE ASSET MANAGEMENT	Occupation ENGINEER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
1000		

Full Name (Last, First, Middle Initial) Marc Iverson		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 6037 Sharon Rd		Transaction ID : SA11Ai-CN4955
City Charlotte	State NC	
Zip Code 28210-6827		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		, , *
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
500		

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

14020104176

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 56 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Virginia James		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address P.O. Box 60		Transaction ID : SA11Ai-CN6058
City	State Zip Code	
Lambertville	NJ 08530-0060	Amount of Each Receipt this Period 2600 .
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600 .	

Full Name (Last, First, Middle Initial) B. Thomas Jayne		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address P. O. Box 123		Transaction ID : SA11Ai-CN1273
City	State Zip Code	
Salysersville	KY 41465	Amount of Each Receipt this Period 500 .
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Coal Producer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500 .	

Full Name (Last, First, Middle Initial) C. Rhonda Jenkins		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 676 HWY 533		Transaction ID : SA11Ai-CN5489
City	State Zip Code	
Stringer	MS 39481-4212	Amount of Each Receipt this Period 2600 .
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600 .	

SUBTOTAL of Receipts This Page (optional).....	5700.00 .
TOTAL This Period (last page this line number only).....	.

14020104177

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 57 OF 166	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. W. L. Jenkins		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 676 HWY 533		Transaction ID : SA11Ai-CN5488
City Stringer	State MS		Zip Code 39481-4212
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600

Full Name (Last, First, Middle Initial) B. Charles Johnson		Date of Receipt M M / D D / Y Y Y Y 11 21 2013
Mailing Address 19 Saint Andrews Dr		Transaction ID : SA11Ai-CN280
City Jackson	State MS		Zip Code 39211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer McGowan Working Partners Inc	Occupation Geologist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500

Full Name (Last, First, Middle Initial) C. Charles Johnson		Date of Receipt M M / D D / Y Y Y Y 12 27 2013
Mailing Address 19 Saint Andrews Dr		Transaction ID : SA11Ai-CN5625
City Jackson	State MS		Zip Code 39211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer McGowan Working Partners Inc	Occupation Geologist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 550

SUBTOTAL of Receipts This Page (optional).....	3150.00
TOTAL This Period (last page this line number only).....	

14020104178

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 58 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Jim Johnson			Date of Receipt M M / D D / Y Y Y Y 12 17 / 2013	
Mailing Address PO Box 1144			Transaction ID : SA11Ai-CN2380	
City Troy	State MT	Zip Code 59935-1144	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. C				
Name of Employer CHLOR RID		Occupation MARKETING		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300		

Full Name (Last, First, Middle Initial) Jim Johnson			Date of Receipt M M / D D / Y Y Y Y 12 30 / 2013	
Mailing Address PO Box 1144			Transaction ID : SA11Ai-CN4181	
City Troy	State MT	Zip Code 59935-1144	Amount of Each Receipt this Period 90	
FEC ID number of contributing federal political committee. C				
Name of Employer CHLOR RID		Occupation MARKETING		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 390		

Full Name (Last, First, Middle Initial) Edward Jonson			Date of Receipt M M / D D / Y Y Y Y 12 11 / 2013	
Mailing Address 16 Hawkview Road			Transaction ID : SA11Ai-CN6131	
City Hudson	State NH	Zip Code 03051-4408	Amount of Each Receipt this Period 250	
FEC ID number of contributing federal political committee. C				
Name of Employer Raytheon Co.		Occupation Project Design		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250		

SUBTOTAL of Receipts This Page (optional).....	440.00
TOTAL This Period (last page this line number only).....	

14020104179

**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 59 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Edward Jonson		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 16 Hawkview Road		Transaction ID : SA11Ai-CN5683
City Hudson	State NH		Zip Code 03051-4408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Raytheon Co.	Occupation Project Design	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 500

Full Name (Last, First, Middle Initial) Edward Jonson		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 16 Hawkview Road		Transaction ID : SA11Ai-CN5806
City Hudson	State NH		Zip Code 03051-4408
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Raytheon Co.	Occupation Project Design	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 250

Full Name (Last, First, Middle Initial) Mr. Edward Karecki		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 3335 N. Harding Avenue		Transaction ID : SA11Ai-CN297
City Chicago	State IL		Zip Code 60618-5103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer blank	Occupation blank	, , 199
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 398

SUBTOTAL of Receipts This Page (optional).....	, , 699.00
TOTAL This Period (last page this line number only).....	, , .

14020104180

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 60 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN298
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 199
FEC ID number of contributing federal political committee. C C00432260		Earmarked contribution-Edward Karecki
Name of Employer	Occupation	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 11264	

Full Name (Last, First, Middle Initial) Cary Katz		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 9021 Grove Crest Ln		Transaction ID : SA11Ai-CN940
City Las Vegas	State NV	
Zip Code 89134-0522		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		Earmarked contribution
Name of Employer COLLEGE LOAN CORPORATION	Occupation CEO	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Jacqueline Katz		Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 9021 Grove Crest Ln		Transaction ID : SA11Ai-CN4088
City Las Vegas	State NV	
Zip Code 89134-0522		Amount of Each Receipt this Period 5200
FEC ID number of contributing federal political committee. C		Earmarked contribution
Name of Employer HOMEMAKER	Occupation HOMEMAKER	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

14020104181

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 61 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Stiles A. Kellett Jr		Date of Receipt M M / D D / Y Y Y Y 10 30 / 2013
Mailing Address 200 Galleria Parkway Suite 1800		Transaction ID : SA11Ai-CN59
City Atlanta	State GA		Zip Code 30339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Kellett Investment Corporation	Occupation Occupation Chairman	, , 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		, , 1000

Full Name (Last, First, Middle Initial) Michael King		Date of Receipt M M / D D / Y Y Y Y 12 06 / 2013
Mailing Address 94 Cascade Key		Transaction ID : SA11Ai-CN533
City Bellevue	State WA		Zip Code 98006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self-employed	Occupation Investor	, , 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		, , 2600

Full Name (Last, First, Middle Initial) Allan Kirby		Date of Receipt M M / D D / Y Y Y Y 12 04 / 2013
Mailing Address PO Box 90 14 E Main St		Transaction ID : SA11Ai-CN6086
City Mendham	State NJ		Zip Code 07945-0090
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self-employed	Occupation Investor	, , 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		, , 2600

SUBTOTAL of Receipts This Page (optional).....	, , 6200.00
TOTAL This Period (last page this line number only).....	, ,

14020104182

**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 62 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Gerald Kirke		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 5465 Mills Civic Pkwy Ste 400		Transaction ID : SA11Ai-CN5636
City West Des Moines	State IA		Zip Code 50266-5321
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Kirke Financial	Occupation Owner	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5646
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 17629	
		Earmarked contribution-Gerald Kirke
		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) C. Gerald Kirke		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 5465 Mills Civic Pkwy Ste 400		Transaction ID : SA11Ai-CN5965
City West Des Moines	State IA		Zip Code 50266-5321
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Kirke Financial	Occupation Owner	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	, , 2000.00
TOTAL This Period (last page this line number only).....	, , *

14020104183

**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 63 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Robert Kirkpatrick		Date of Receipt M M / D D / Y Y Y Y 12 30 / 2013
Mailing Address 28817 Oxford Rd.		Transaction ID : SA11Ai-CN6221
City Louisburg	State KS		Zip Code 66053-6110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer n.a.		, , 500 *
Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 500 *
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) B. Wendy Kolokotronis		Date of Receipt M M / D D / Y Y Y Y 12 13 / 2013
Mailing Address PO Box 1449		Transaction ID : SA11Ai-CN5099
City La Canada Flintridge	State CA		Zip Code 91012-5449
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer HOMEMAKER		, , 2600 *
Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 2600 *
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C. Richard Korpan		Date of Receipt M M / D D / Y Y Y Y 12 03 / 2013
Mailing Address 31483 Morning Star Dr.		Transaction ID : SA11Ai-CN6113
City Evergreen	State CO		Zip Code 80439-7969
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer n.a.		, , 500 *
Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 500 *
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	, , 3600.00 *
TOTAL This Period (last page this line number only).....	, , *

14020104184

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 64 OF 166	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Cary Kresge		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 2045 Summerland Avenue		Transaction ID : SA11Ai-CN5937
City Winter Park	State FL		Zip Code 32789-1453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Florida Medical Development	Occupation Businessman	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) B. Mr. Cary Kresge		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2045 Summerland Avenue		Transaction ID : SA11Ai-CN239
City Winter Park	State FL		Zip Code 32789-1453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Florida Medical Development	Occupation Businessman	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN260
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 200
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10490	

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

14020104185

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 65 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Cary Kresge		Date of Receipt MM / DD / YYYY 10 / 28 / 2013
Mailing Address 2045 Summerland Avenue		Transaction ID : SA11Ai-CN345
City Winter Park	State FL		Zip Code 32789-1453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Florida Medical Development	Occupation Businessman	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 800

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt MM / DD / YYYY 10 / 28 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN346
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period
Name of Employer	Occupation	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	Earmarked contribution-Cary Kresge [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
		, , 13484

Full Name (Last, First, Middle Initial) Mr. Cary Kresge		Date of Receipt MM / DD / YYYY 12 / 12 / 2013
Mailing Address 2045 Summerland Avenue		Transaction ID : SA11Ai-CN6161
City Winter Park	State FL		Zip Code 32789-1453
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Florida Medical Development	Occupation Businessman	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 1000

SUBTOTAL of Receipts This Page (optional).....	, , 400.00
TOTAL This Period (last page this line number only).....	, ,

14020104186

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 66 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Cary Kresge		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address 2045 Summerland Avenue City Winter Park State FL Zip Code 32789-1453		Transaction ID : SA11Ai-CN5365
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Florida Medical Development	Occupation Businessman	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 400

Full Name (Last, First, Middle Initial) B. Cary Kresge		Date of Receipt M M / D D / Y Y Y Y 12 16 / 2013
Mailing Address 2045 Summerland Avenue City Winter Park State FL Zip Code 32789-1453		Transaction ID : SA11Ai-CN5746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Florida Medical Development	Occupation Businessman	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 600

Full Name (Last, First, Middle Initial) C. Cary Kresge		Date of Receipt M M / D D / Y Y Y Y 12 16 / 2013
Mailing Address 2045 Summerland Avenue City Winter Park State FL Zip Code 32789-1453		Transaction ID : SA11Ai-CN5836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Florida Medical Development	Occupation Businessman	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 800

SUBTOTAL of Receipts This Page (optional).....	, , 600.00
TOTAL This Period (last page this line number only).....	, ,

14020104187

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 67 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Karl Kronberg		Date of Receipt M M / D D / Y Y Y Y 12 30 / 2013	
Mailing Address 838 Arnold Rd		Transaction ID : SA11Ai-CN4497	
City Lowell	State OH	Zip Code 45744-7195	Amount of Each Receipt this Period , , . 75
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , . 275		

Full Name (Last, First, Middle Initial) B. Roger Kucway		Date of Receipt M M / D D / Y Y Y Y 12 11 / 2013	
Mailing Address 5954 Walnut Springs Road		Transaction ID : SA11Ai-CN6151	
City Sylvania	State OH	Zip Code 43560-8617	Amount of Each Receipt this Period , , . 400
FEC ID number of contributing federal political committee. C			
Name of Employer TRO inc	Occupation physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , . 400		

Full Name (Last, First, Middle Initial) C. Roger Kucway		Date of Receipt M M / D D / Y Y Y Y 12 16 / 2013	
Mailing Address 5954 Walnut Springs Road		Transaction ID : SA11Ai-CN5703	
City Sylvania	State OH	Zip Code 43560-8617	Amount of Each Receipt this Period , , . 400
FEC ID number of contributing federal political committee. C			
Name of Employer TRO inc	Occupation physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , . 800		

SUBTOTAL of Receipts This Page (optional).....	, , . 875.00
TOTAL This Period (last page this line number only).....	, , .

14020104188

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 68 OF 166	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Roger Kucway		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 5954 Walnut Springs Road City: Sylvania State: OH Zip Code: 43560-8617		Transaction ID : SA11Ai-CN5826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
Name of Employer TRO inc	Occupation physician	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) B. Anne Kuhn		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 22474 North Nottingham Drive City: Beverly Hills State: MI Zip Code: 48025-3519		Transaction ID : SA11Ai-CN5696
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer n.a	Occupation Retired	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) C. Eugene Kusmiak		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 136 East 56th Street #15e City: New York State: NY Zip Code: 10022-3620		Transaction ID : SA11Ai-CN5794
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer Spark Investment Management	Occupation Portfolio Manager	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

SUBTOTAL of Receipts This Page (optional).....	, , 2600.00
TOTAL This Period (last page this line number only).....	, , *

14020104189

**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 69 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Eugene Kusmiak		Date of Receipt M M / D D / Y Y Y Y 12 02 2013
Mailing Address 136 East 56th Street #15e		Transaction ID : SA11Ai-CN6019
City New York	State Zip Code NY 10022-3620	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer Spark Investment Management	Occupation Portfolio Manager	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) Terry Lacore		Date of Receipt M M / D D / Y Y Y Y 12 30 2013
Mailing Address 522 Lacore Ln		Transaction ID : SA11Ai-CN4040
City Melissa	State Zip Code TX 75454-2659	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer SELF	Occupation EXECUTIVE	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) William Lamothe		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 2380 Troon Court		Transaction ID : SA11Ai-CN5771
City Sanibel	State Zip Code FL 33957-2218	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	, , *	3250.00
TOTAL This Period (last page this line number only).....	, , *	

14020104190

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 70 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. William Lamothe		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013	
Mailing Address 2380 Troon Court		Transaction ID : SA11Ai-CN5996	
City Sanibel	State FL	Zip Code 33957-2218	Amount of Each Receipt this Period , , 1000 *
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000 *		

Full Name (Last, First, Middle Initial) B. Dewey Lane		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013	
Mailing Address PO Box 1245		Transaction ID : SA11Ai-CN5951	
City Pascagoula	State MS	Zip Code 39568-1245	Amount of Each Receipt this Period , , 250 *
FEC ID number of contributing federal political committee.		C	
Name of Employer n.a	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 250 *		

Full Name (Last, First, Middle Initial) C. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013	
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN6128	
City Northfield	State IL	Zip Code 60093-2706	Amount of Each Receipt this Period , , 2600 *
FEC ID number of contributing federal political committee.		C	
Name of Employer Self	Occupation Real Estate Investor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2600 *		

SUBTOTAL of Receipts This Page (optional).....	, , 3850.00
TOTAL This Period (last page this line number only).....	, , *

14020104191

**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 71 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 11 2013
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN6138
City Northfield	State IL		Zip Code 60093-2706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self		2400
Occupation Real Estate Investor		,
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		5000
		,
		*

Full Name (Last, First, Middle Initial) B. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN5680
City Northfield	State IL		Zip Code 60093-2706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self		2600
Occupation Real Estate Investor		,
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		7600
		,
		*

Full Name (Last, First, Middle Initial) C. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN5690
City Northfield	State IL		Zip Code 60093-2706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self		2400
Occupation Real Estate Investor		,
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date		10000
		,
		*

SUBTOTAL of Receipts This Page (optional).....	7400.00
TOTAL This Period (last page this line number only).....	*

14020104192

**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 72 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN5803
City Northfield	State IL		Zip Code 60093-2706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self	Occupation Real Estate Investor	, , 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 2600

Full Name (Last, First, Middle Initial) B. Harry Langer		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 2350 Dorina Drive		Transaction ID : SA11Ai-CN5813
City Northfield	State IL		Zip Code 60093-2706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self	Occupation Real Estate Investor	, , 2400
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 5000

Full Name (Last, First, Middle Initial) C. Kurt Lawler		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 3445 Black Bear Cove		Transaction ID : SA11Ai-CN5856
City Burlington	State NC		Zip Code 27215-9313
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer GE Healthcare	Occupation retired	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 400

SUBTOTAL of Receipts This Page (optional).....	, , 5200.00
TOTAL This Period (last page this line number only).....	, ,

14020104193

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

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

FOR LINE NUMBER: PAGE 73 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Paul Leach		Date of Receipt M M / D D / Y Y Y Y 10 17 / 2013
Mailing Address P.O. Box 1510		Transaction ID : SA11Ai-CN5872
City Glen Ellen	State CA	
Zip Code 95442-1510		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Paul Leach & Company	Occupation private investment banking	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Mr. Paul Leach		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address P.O. Box 1510		Transaction ID : SA11Ai-CN143
City Glen Ellen	State CA	
Zip Code 95442-1510		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Paul Leach & Company	Occupation private investment banking	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN262
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 500 Earmarked contribution-Paul Leach
FEC ID number of contributing federal political committee. C C00432260		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7860	

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

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

14020104194

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 74 OF 166
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Paul Leach		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address P.O. Box 1510 City: Glen Ellen State: CA Zip Code: 95442-1510		Transaction ID : SA11Ai-CN5378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Paul Leach & Company	Occupation private investment banking	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Karen Lien		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 1435 Elephant Rd City: Perkasie State: PA Zip Code: 18944-3809		Transaction ID : SA11Ai-CN1395
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. Karen Lien		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 1435 Elephant Rd City: Perkasie State: PA Zip Code: 18944-3809		Transaction ID : SA11Ai-CN4971
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 761
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1011	

SUBTOTAL of Receipts This Page (optional).....	1511.00
TOTAL This Period (last page this line number only).....	

14020104195

**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 75 OF 166
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Matthew Lusk		Date of Receipt M M / D D / Y Y Y Y 10 24 2013
Mailing Address 305 West Oak Street Po Box 304		Transaction ID : SA11Ai-CN36
City Sanderson	State TX	
Zip Code 79848		Amount of Each Receipt this Period 250 . ,
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation dime store owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		250 . ,

Full Name (Last, First, Middle Initial) Mr. Brewster Macfarland		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 415 North State Street Suite 1		Transaction ID : SA11Ai-CN223
City Chicago	State IL	
Zip Code 60654-4607		Amount of Each Receipt this Period 200 . ,
FEC ID number of contributing federal political committee. C		
Name of Employer Law Bulletin Publishing Company	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		400 . ,

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN263
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 200 . ,
FEC ID number of contributing federal political committee. C C00432260		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		9278 . ,
		Earmarked-Brewster Macfarland
		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

14020104196

**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 76 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Brewster Macfarland		Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 415 North State Street Suite 1		Transaction ID : SA11Ai-CN6181
City Chicago	State IL		Zip Code 60654-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Law Bulletin Publishing Company	Occupation Executive	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 600

Full Name (Last, First, Middle Initial) Brewster Macfarland		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 415 North State Street Suite 1		Transaction ID : SA11Ai-CN5767
City Chicago	State IL		Zip Code 60654-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Law Bulletin Publishing Company	Occupation Executive	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 400

Full Name (Last, First, Middle Initial) Brewster Macfarland		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 415 North State Street Suite 1		Transaction ID : SA11Ai-CN5858
City Chicago	State IL		Zip Code 60654-4607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Law Bulletin Publishing Company	Occupation Executive	, , 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 600

SUBTOTAL of Receipts This Page (optional).....	, , 600.00
TOTAL This Period (last page this line number only).....	, ,

14020104197

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 77 OF 166	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Lanning Macfarland			Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 415 N State St Ste 1			Transaction ID : SA11AI-CN6107	
City Chicago	State IL	Zip Code 60654-4607	Amount of Each Receipt this Period 500	
FEC ID number of contributing federal political committee. C				
Name of Employer None	Occupation Retired			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) B. John Marshall			Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013	
Mailing Address 136 Moorings Park Drive Apt. P502			Transaction ID : SA11AI-CN6126	
City Naples	State FL	Zip Code 34105-2995	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C				
Name of Employer n.a	Occupation Retired			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) C. John Marshall			Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013	
Mailing Address 136 Moorings Park Drive Apt. P502			Transaction ID : SA11AI-CN5678	
City Naples	State FL	Zip Code 34105-2995	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C				
Name of Employer n.a	Occupation Retired			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

14020104198

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 78 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. John Marshall		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 136 Moorings Park Drive Apt. P502		Transaction ID : SA11Ai-CN5801
City Naples	State FL	
Zip Code 34105-2995		Amount of Each Receipt this Period 1000 .00
FEC ID number of contributing federal political committee. C		
Name of Employer n.a	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000 .	

Full Name (Last, First, Middle Initial) B. Mary Matthews		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 4876 Patrick Rd		Transaction ID : SA11Ai-CN4964
City Winnsboro	State SC	
Zip Code 29180-6491		Amount of Each Receipt this Period 100 .00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300 .	

Full Name (Last, First, Middle Initial) C. Mary Matthews		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 4876 Patrick Rd		Transaction ID : SA11Ai-CN4965
City Winnsboro	State SC	
Zip Code 29180-6491		Amount of Each Receipt this Period 100 .00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400 .	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

14020104199

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 79 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Jonathan E. May		Date of Receipt M M / D D / Y Y Y Y 10 22 / 2013
Mailing Address 7000 Lakepointe Drive		Transaction ID : SA11Ai-CN5906
City Oklahoma City	State OK		Zip Code 73116-1629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self	Occupation Sales	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

Full Name (Last, First, Middle Initial) Mr. Jonathan E. May		Date of Receipt M M / D D / Y Y Y Y 10 28 / 2013
Mailing Address 7000 Lakepointe Drive		Transaction ID : SA11Ai-CN283
City Oklahoma City	State OK		Zip Code 73116-1629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self	Occupation Sales	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	1000

Full Name (Last, First, Middle Initial) Jonathan May		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address 7000 Lakepointe Drive		Transaction ID : SA11Ai-CN5333
City Oklahoma City	State OK		Zip Code 73116-1629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Self	Occupation Sales	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

14020104200

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 80 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. John McAnulty		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address 16411fox Crossing Lane		Transaction ID : SA11Ai-CN462	
City State Zip Code Spring TX 77379	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250	
Name of Employer HILCORP ENERGY	Occupation GEOLOGIST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 250		

Full Name (Last, First, Middle Initial) B. Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN648	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C C00448696		Amount of Each Receipt this Period , , 250	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 7248		
		Earmarked contribution-John McAnulty [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.	

Full Name (Last, First, Middle Initial) C. Mr. James A McCullough		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2013	
Mailing Address 4025 Fred Martin Road		Transaction ID : SA11Ai-CN53	
City State Zip Code Summit MS 39666	Amount of Each Receipt this Period , , 500		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 500	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 500		

SUBTOTAL of Receipts This Page (optional).....	, , 750.00
TOTAL This Period (last page this line number only).....	, ,

14020104201

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 81 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Billy McDaniel		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 804 Justus Rd		Transaction ID : SA11Ai-CN2064
City Banner Elk	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200
Name of Employer Retired H&p	Occupation Retired	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) B. Ms. Charlotte McDaniel		Date of Receipt M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 26 Carlos Drive		Transaction ID : SA11Ai-CN2043
City Ellisville	State MS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) C. Thomas McGrath		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 2150 Jefferson Ln		Transaction ID : SA11Ai-CN4031
City Huntingdon Valley	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer SELF	Occupation ENTREPRENEUR	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	8300.00
TOTAL This Period (last page this line number only).....	

14020104202

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 82 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address P.O. Box 1830		Transaction ID : SA11Ai-CN5916
City Davis	State CA		Zip Code 95617-1830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Davisville Properties Inc.	Occupation CEO	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 250

Full Name (Last, First, Middle Initial) B. Mr. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address P.O. Box 1830		Transaction ID : SA11Ai-CN299
City Davis	State CA		Zip Code 95617-1830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Davisville Properties Inc.	Occupation CEO	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 500

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN300
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period
Name of Employer	Occupation	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 11514

SUBTOTAL of Receipts This Page (optional).....	, , 500.00
TOTAL This Period (last page this line number only).....	, ,

14020104203

**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 83 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 11 05 / 2013	
Mailing Address P.O. Box 1830		Transaction ID : SA11AI-CN5974	
City State Zip Code Davis CA 95617-1830	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 750	
Name of Employer Davisville Properties Inc.	Occupation CEO	Amount of Each Receipt this Period , , 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 750	Amount of Each Receipt this Period , , 250	

Full Name (Last, First, Middle Initial) B. Mr. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 11 08 / 2013	
Mailing Address P.O. Box 1830		Transaction ID : SA11AI-CN5976	
City State Zip Code Davis CA 95617-1830	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1000	
Name of Employer Davisville Properties Inc.	Occupation CEO	Amount of Each Receipt this Period , , 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000	Amount of Each Receipt this Period , , 250	

Full Name (Last, First, Middle Initial) C. Mr. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 11 21 / 2013	
Mailing Address P.O. Box 1830		Transaction ID : SA11AI-CN5982	
City State Zip Code Davis CA 95617-1830	Amount of Each Receipt this Period , , 100		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1100	
Name of Employer Davisville Properties Inc.	Occupation CEO	Amount of Each Receipt this Period , , 100	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1100	Amount of Each Receipt this Period , , 100	

SUBTOTAL of Receipts This Page (optional).....	, , 600.00
TOTAL This Period (last page this line number only).....	, ,

14020104204

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 84 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address P.O. Box 1830		Transaction ID : SA11Ai-CN5343
City Davis	State CA	
Zip Code 95617-1830		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Davisville Properties Inc.	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) B. Greg McNece		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address P.O. Box 1830		Transaction ID : SA11Ai-CN5645
City Davis	State CA	
Zip Code 95617-1830		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Davisville Properties Inc.	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5654
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 250 Earmarked contribution-Greg McNece
FEC ID number of contributing federal political committee. C C00432260		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 26354	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

14020104205

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 86 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Charles Millikin		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 2347 Estate Gate Drive City State Zip Code San Antonio TX 78260-2209		Transaction ID : SA11AI-CN5853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 200
Name of Employer n.a.	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 400	

Full Name (Last, First, Middle Initial) B. Robert Morris		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 98 Riverside Avenue City State Zip Code Riverside CT 06878-1619		Transaction ID : SA11AI-CN5764
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250
Name of Employer O'Connor Davies LLP	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 250	

Full Name (Last, First, Middle Initial) C. Robert Morris		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 98 Riverside Avenue City State Zip Code Riverside CT 06878-1619		Transaction ID : SA11AI-CN5855
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250
Name of Employer O'Connor Davies LLP	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 500	

SUBTOTAL of Receipts This Page (optional).....	, , 700.00
TOTAL This Period (last page this line number only).....	, ,

14020104207

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 87 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Robert Morris			Date of Receipt M M / D D / Y Y Y Y 12 13 / 2013	
Mailing Address 98 Riverside Avenue			Transaction ID : SA11Ai-CN6178	
City Riverside	State CT	Zip Code 06878-1619	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			, , 250	
Name of Employer O'Connor Davies LLP	Occupation CPA		, , *	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250	

Full Name (Last, First, Middle Initial) Wiley Mossy			Date of Receipt M M / D D / Y Y Y Y 12 11 / 2013	
Mailing Address 1000 Uptown Park Blvd Apt 223			Transaction ID : SA11Ai-CN6139	
City Houston	State TX	Zip Code 77056-3250	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			, , 500	
Name of Employer Mossy Nissan	Occupation Automobile Dealer		, , *	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 500	

Full Name (Last, First, Middle Initial) Wiley Mossy			Date of Receipt M M / D D / Y Y Y Y 12 16 / 2013	
Mailing Address 1000 Uptown Park Blvd Apt 223			Transaction ID : SA11Ai-CN5691	
City Houston	State TX	Zip Code 77056-3250	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			, , 500	
Name of Employer Mossy Nissan	Occupation Automobile Dealer		, , *	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 1000	

SUBTOTAL of Receipts This Page (optional).....	, , 1250.00
TOTAL This Period (last page this line number only).....	, , *

14020104208

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Wiley Mossy		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1000 Uptown Park Blvd Apt 223		Transaction ID : SA11Ai-CN5814
City Houston	State TX	
Zip Code 77056-3250		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Mossy Nissan	Occupation Automobile Dealer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Mr. David Mr.		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 213 GOLDEN POND DRIVE		Transaction ID : SA11Ai-CN113
City MADISON	State MS	
Zip Code 39110		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer Wesley Biblical Seminary	Occupation Adjunct Professor/Seminary Organist/P	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) C. Mr. Scott M Muehlberger		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 616 Memorial Heights Drive Apt. #1		Transaction ID : SA11Ai-CN5890
City Houston	State TX	
Zip Code 77007-6080		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Bracewell & Giuliani	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	3350.00
TOTAL This Period (last page this line number only).....	

14020104209

**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 89 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Mr. Scott M Muehlberger		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 616 Memorial Heights Drive Apt. #1		Transaction ID : SA11Ai-CN191
City Houston	State Zip Code TX 77007-6080	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Bracewell & Giuliani		, , 250
Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 500
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN268
City Washington	State Zip Code DC 20036	
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period
Name of Employer		, , 250
Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Earmarked-Scott Muehlberger (MEMO ITEM) Total earmarked through conduit. PAC limit not affected.
Election Cycle-to-Date		
		, , 7240

Full Name (Last, First, Middle Initial) Scott Muehlberger		Date of Receipt M M / D D / Y Y Y Y 10 18 2013
Mailing Address 616 Memorial Heights Drive Apt. #1		Transaction ID : SA11Ai-CN5396
City Houston	State Zip Code TX 77007-6080	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Bracewell & Giuliani		, , 250
Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		, , 250
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	, , 500.00
TOTAL This Period (last page this line number only).....	, ,

14020104210

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 90 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Trent Mulloy		Date of Receipt M M / D D / Y Y Y Y 12 27 2013	
Mailing Address 63 Northgate Drive		Transaction ID : SA11Ai-CN2054	
City State Zip Code Laurel MS 39440	Amount of Each Receipt this Period , , 1000		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1000	
Name of Employer Occupation Laurel Machine & Foundry Manager	Election Cycle-to-Date , , 1000		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Joe Murphy		Date of Receipt M M / D D / Y Y Y Y 12 03 2013	
Mailing Address 519 Blackjack Oak		Transaction ID : SA11Ai-CN6065	
City State Zip Code Shavano Park TX 78230-5637	Amount of Each Receipt this Period , , 2600		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2600	
Name of Employer Occupation Murphy Tomatoes Sales	Election Cycle-to-Date , , 2600		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Mrs. Ellis F. Naegele		Date of Receipt M M / D D / Y Y Y Y 11 04 2013	
Mailing Address 7993 Via Vecchia		Transaction ID : SA11Ai-CN110	
City State Zip Code Naples FL 34108	Amount of Each Receipt this Period , , 250		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 250	
Name of Employer Occupation	Election Cycle-to-Date , , 250		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	, , 3850.00
TOTAL This Period (last page this line number only).....	, ,

14020104211

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Mr. Robert O. Naegele

Mailing Address 7993 Via Vecchia

City Naples State FL Zip Code 34108

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 04 / 2013

Transaction ID : SA11Ai-CN109

Amount of Each Receipt this Period
250

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

Mailing Address 111 Southview Lane

City Alamo State CA Zip Code 94507-2314

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

Name of Employer Occupation
n.a. attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 17 / 2013

Transaction ID : SA11Ai-CN5877

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. David A. Nearon

Mailing Address 111 Southview Lane

City Alamo State CA Zip Code 94507-2314

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

Name of Employer Occupation
n.a. attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 25 / 2013

Transaction ID : SA11Ai-CN195

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional)..... 1250.00

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

14020104212

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 92 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Club for Growth Pac Candidate Contributions

Full Name (Last, First, Middle Initial)
Mailing Address 2001 L St. NW Ste. 600

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8545

Date of Receipt
M M / D D / Y Y Y Y
10 25 2013

Transaction ID : SA11C-CN269

Amount of Each Receipt this Period
500

Earmarked contribution-David Nearon

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

B. David Nearon

Full Name (Last, First, Middle Initial)
Mailing Address 111 Southview Lane

City Alamo	State CA	Zip Code 94507-2314
---------------	-------------	------------------------

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

Name of Employer n.a.	Occupation attorney
--------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 18 2013

Transaction ID : SA11Ai-CN5383

Amount of Each Receipt this Period
500

C. Mr. Lathrop Nelson

Full Name (Last, First, Middle Initial)
Mailing Address 13 Courtney Cir

City Bryn Mawr	State PA	Zip Code 19010-3704
-------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
11 01 2013

Transaction ID : SA11Ai-CN467

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

14020104213

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 93 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN653	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period , , . 250		
FEC ID number of contributing federal political committee. C C00448696	Earmarked contribution-Lathrop Nelson [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.		
Name of Employer Occupation 	Election Cycle-to-Date , , . 7498		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Richard Nord		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013	
Mailing Address 6256 Shadyside Dr		Transaction ID : SA11Ai-CN4154	
City State Zip Code Vermilion OH 44089-1052	Amount of Each Receipt this Period , , . 2000		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LAND CONCEPTS CO. INC. LANDSCAPE CONSULTANT	Election Cycle-to-Date , , . 2000		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Ms. Maryann Oberhofer		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013	
Mailing Address 3708 Point Clear Dr.		Transaction ID : SA11Ai-CN9	
City State Zip Code Ocean Springs MS 39574	Amount of Each Receipt this Period , , . 500		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation None None	Election Cycle-to-Date , , . 500		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	, , . 2500.00
TOTAL This Period (last page this line number only).....	, , .

14020104214

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Richard Offerdahl		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 593 Lariat Circle		Transaction ID : SA11Ai-CN6127
City Incline Village	State NV		Zip Code 89451-8305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer maxir corp	Occupation manager	2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	2600

Full Name (Last, First, Middle Initial) Richard Offerdahl		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 593 Lariat Circle		Transaction ID : SA11Ai-CN5679
City Incline Village	State NV		Zip Code 89451-8305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer maxir corp	Occupation manager	2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	5200

Full Name (Last, First, Middle Initial) Richard Offerdahl		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 593 Lariat Circle		Transaction ID : SA11Ai-CN5802
City Incline Village	State NV		Zip Code 89451-8305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer maxir corp	Occupation manager	2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	2600

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

14020104215

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 95 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Steffen Parratt			Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013		
Mailing Address 11 Sarah Drive			Transaction ID : SA11Ai-CN5979		
City	State	Zip Code	Amount of Each Receipt this Period		
Princeton Junction	NJ	08550-1244	, , .		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , . 250		
Name of Employer Organization Simplification Inc		Occupation entrepreneur	, , .		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , . 250			

Full Name (Last, First, Middle Initial) B. Ms. Tiffany Parrish			Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013		
Mailing Address P.O. Box 8155			Transaction ID : SA11Ai-CN15		
City	State	Zip Code	Amount of Each Receipt this Period		
Laurel	MS	39441	, , .		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , . 225		
Name of Employer Tiffany A. Parrish		Occupation Political Consultant	, , .		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , . 225			

Full Name (Last, First, Middle Initial) C. Brad Patano			Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013		
Mailing Address 147 Pittman Rd			Transaction ID : SA11Ai-CN1120		
City	State	Zip Code	Amount of Each Receipt this Period		
Ocean Springs	MS	39564	, , .		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , . 250		
Name of Employer Machado Patano		Occupation Engineer	, , .		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , . 250			

SUBTOTAL of Receipts This Page (optional).....			, , . 725.00		
TOTAL This Period (last page this line number only).....			, , .		

14020104216

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 96 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) James Patterson		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 215 5th Street Suite 100		Transaction ID : SA11Ai-CN5775
City West Palm Beach	State FL	
Zip Code 33401-4026		Amount of Each Receipt this Period , , 2000 .
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2000 .	

Full Name (Last, First, Middle Initial) James Patterson		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 215 5th Street Suite 100		Transaction ID : SA11Ai-CN6000
City West Palm Beach	State FL	
Zip Code 33401-4026		Amount of Each Receipt this Period , , 2000 .
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2000 .	

Full Name (Last, First, Middle Initial) Nicholas Peay		Date of Receipt M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 2965 Fairmount Blvd.		Transaction ID : SA11Ai-CN6032
City Cleveland Heights	State OH	
Zip Code 44118-4060		Amount of Each Receipt this Period , , 500 .
FEC ID number of contributing federal political committee. C		
Name of Employer NA	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 500 .	

SUBTOTAL of Receipts This Page (optional).....	, , 4500.00 .
TOTAL This Period (last page this line number only).....	, , .

14020104217

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

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

FOR LINE NUMBER: PAGE 97 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Anee Perri

Mailing Address 4975 S.W. 65th Ave.

City State Zip Code
Portland OR 97221

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

Name of Employer Occupation
Small Business Owner Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 18 2013

Transaction ID : SA11Ai-CN1194

Amount of Each Receipt this Period
500

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

Mailing Address 962 Asbury Road

City State Zip Code
Waynesville NC 28785-7979

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

Name of Employer Occupation
n.a. Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 25 2013

Transaction ID : SA11Ai-CN225

Amount of Each Receipt this Period
400

C. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 25 2013

Transaction ID : SA11C-CN271

Amount of Each Receipt this Period
200

Earmarked contribution-Robert Persons

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... 700.00

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

14020104218

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 98 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) John Popp			Date of Receipt M M / D D / Y Y Y Y 12 11 2013	
Mailing Address 12316 Aboite Center Road			Transaction ID : SA11Ai-CN6134	
City Fort Wayne	State IN	Zip Code 46814-9725	Amount of Each Receipt this Period , , 250	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 250	
Name of Employer Perfection Bakeries Inc.		Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 250		

Full Name (Last, First, Middle Initial) John Popp			Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address 12316 Aboite Center Road			Transaction ID : SA11Ai-CN5686	
City Fort Wayne	State IN	Zip Code 46814-9725	Amount of Each Receipt this Period , , 250	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 500	
Name of Employer Perfection Bakeries Inc.		Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 500		

Full Name (Last, First, Middle Initial) John Popp			Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address 12316 Aboite Center Road			Transaction ID : SA11Ai-CN5809	
City Fort Wayne	State IN	Zip Code 46814-9725	Amount of Each Receipt this Period , , 250	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 250	
Name of Employer Perfection Bakeries Inc.		Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 250		

SUBTOTAL of Receipts This Page (optional).....	, , 750.00
TOTAL This Period (last page this line number only).....	, ,

14020104219

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 OF 166

(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	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Douglas Powell		Date of Receipt MM / DD / YYYY 12 / 13 / 2013
Mailing Address 17 Club Terrace		Transaction ID : SA11Ai-CN6143
City Newport News	State VA	Zip Code 23606-2836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation retired	, , 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 300

Full Name (Last, First, Middle Initial) B. Douglas Powell		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 17 Club Terrace		Transaction ID : SA11Ai-CN5695
City Newport News	State VA	Zip Code 23606-2836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation retired	, , 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 600

Full Name (Last, First, Middle Initial) C. Douglas Powell		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 17 Club Terrace		Transaction ID : SA11Ai-CN5818
City Newport News	State VA	Zip Code 23606-2836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation retired	, , 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 300

SUBTOTAL of Receipts This Page (optional).....	, , 900.00
TOTAL This Period (last page this line number only).....	, ,

14020104220

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ms. Mary P. Price-McLaurin		Date of Receipt M M / D D / Y Y Y Y 11 14 / 2013
Mailing Address P.O. Box 685		Transaction ID : SA11Ai-CN177
City Ridgeland	State Zip Code MS 39158	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

Full Name (Last, First, Middle Initial) B. Dick Randall		Date of Receipt M M / D D / Y Y Y Y 11 08 / 2013
Mailing Address 22348 Regnard Road		Transaction ID : SA11Ai-CN5637
City Cupertino	State Zip Code Ca 95014-4825	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer n.a.	Occupation retired	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	500

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 08 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5647
City Washington	State Zip Code DC 20036	
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period
Name of Employer	Occupation	500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	18129
		Earmarked contribution-Dick Randall
		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

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

14020104221

**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 101 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Dick Randall		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 22348 Regnart Road		Transaction ID : SA11Ai-CN5966
City Cupertino	State Ca		Zip Code 95014-4825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer n.a.	Occupation retired	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Robert Reingold		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 1482 East Valley Road Suite 601		Transaction ID : SA11Ai-CN6069
City Montecito	State CA		Zip Code 93108-1200
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer	Occupation Business	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Riggs		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 2483 Little Lane NE		Transaction ID : SA11Ai-CN51
City Wesson	State MS		Zip Code 39191
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	, , .	5600.00
TOTAL This Period (last page this line number only).....	, , .	.

14020104222

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

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

FOR LINE NUMBER: PAGE 102 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Mr. Robert P. Riggs

Full Name (Last, First, Middle Initial)
Mailing Address 2483 Little Lane NE

City Wesson State MS Zip Code 39191

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2013

Transaction ID : SA11Ai-CN49

Amount of Each Receipt this Period
2500

B. Hall Roberts

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 10

City Postville State IA Zip Code 52162-0010

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

Name of Employer Occupation
Hall Roberts' & Son President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11Ai-CN5681

Amount of Each Receipt this Period
150

C. Mark Roberts

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 61

City Mize State MS Zip Code 39116

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

Name of Employer Occupation
Roberts Oil & Land Company Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11Ai-CN2769

Amount of Each Receipt this Period
990

SUBTOTAL of Receipts This Page (optional)..... 3640.00

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

14020104223

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 103 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 11e	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Dr. Brett Robinson		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 16 Northgate Drive		Transaction ID : SA11Ai-CN2042
City Laurel	State MS		Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) Susan Robinson		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 16 Northgate Drive		Transaction ID : SA11Ai-CN5485
City Laurel	State MS		Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer Homemaker	Occupation Homemaker	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) Mr. Joe D. Robison		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address P.O. Box 545		Transaction ID : SA11Ai-CN5739
City Laurel	State MS		Zip Code 39441
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

14020104224

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 104 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mrs. Joe D. Robison		Date of Receipt M M / D D / Y Y Y Y 11 27 / 2013
Mailing Address P.O. Box 545		Transaction ID : SA11Ai-CN5741
City Laurel State MS Zip Code . 39441	Amount of Each Receipt this Period , , 2500 .	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2500 .
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 2500 .	

Full Name (Last, First, Middle Initial) B. Norman Rogers		Date of Receipt M M / D D / Y Y Y Y 12 05 / 2013
Mailing Address 175 East Delaware Place Apt 5608		Transaction ID : SA11Ai-CN521
City Chicago State IL Zip Code 60611	Amount of Each Receipt this Period , , 1500 .	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1500 .
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1500 .	

Full Name (Last, First, Middle Initial) C. Norman Rogers		Date of Receipt M M / D D / Y Y Y Y 11 20 / 2013
Mailing Address 2627 S Bayshore Dr Apt 1204		Transaction ID : SA11Ai-CN1912
City Miami State FL Zip Code 33133-5441	Amount of Each Receipt this Period , , 1000 .	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1000 .
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000 .	

SUBTOTAL of Receipts This Page (optional).....	, , 5000.00 .
TOTAL This Period (last page this line number only).....	, , .

14020104225

**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 105 OF 166	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ms. Leslie Rose		Date of Receipt M M / D D / Y Y Y Y 10 24 / 2013
Mailing Address 330 South Ocean Boulevard		Transaction ID : SA11Ai-CN5909
City Palm Beach	State FL	
Zip Code 33480-4214		Amount of Each Receipt this Period 500 , , *
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500 , , *	

Full Name (Last, First, Middle Initial) B. Ms. Leslie Rose		Date of Receipt M M / D D / Y Y Y Y 10 28 / 2013
Mailing Address 330 South Ocean Boulevard		Transaction ID : SA11Ai-CN285
City Palm Beach	State FL	
Zip Code 33480-4214		Amount of Each Receipt this Period 500 , , *
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000 , , *	

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 28 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN359
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 500 , , * Earmarked contribution-Leslie Rose [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
FEC ID number of contributing federal political committee. C C00432260		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12929 , , *	

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

14020104226

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 106 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Ms. Leslie Rose		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 330 South Ocean Boulevard		Transaction ID : SA11Ai-CN516
City Palm Beach	State FL		Zip Code 33480-4214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer None	Occupation Retired	, , 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 1500

Full Name (Last, First, Middle Initial) B. Leslie Rose		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 330 South Ocean Boulevard		Transaction ID : SA11Ai-CN5336
City Palm Beach	State FL		Zip Code 33480-4214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer None	Occupation Retired	, , 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 500

Full Name (Last, First, Middle Initial) C. John W. Sampson		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 9614 Parkwood Ct		Transaction ID : SA11Ai-CN2612
City Fort Myers	State FL		Zip Code 33908-2861
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	, , 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 250

SUBTOTAL of Receipts This Page (optional).....	, , 1250.00
TOTAL This Period (last page this line number only).....	, , *

14020104227

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 107 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) John W. Sampson			Date of Receipt M M / D D / Y Y Y Y 12 27 / 2013		
Mailing Address 9614 Parkwood Ct			Transaction ID : SA11Ai-CN4640		
City Fort Myers	State FL	Zip Code 33908-2861	Amount of Each Receipt this Period 500		
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED	Occupation RETIRED				
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750			

Full Name (Last, First, Middle Initial) Charles Sanford			Date of Receipt M M / D D / Y Y Y Y 12 27 / 2013		
Mailing Address PO Box 17632			Transaction ID : SA11Ai-CN4644		
City Denver	State CO	Zip Code 80217-0632	Amount of Each Receipt this Period 956		
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED	Occupation RETIRED				
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 956			

Full Name (Last, First, Middle Initial) Mary S. Sanford			Date of Receipt M M / D D / Y Y Y Y 12 31 / 2013		
Mailing Address 3112 Highway 588			Transaction ID : SA11Ai-CN5714		
City Ellisville	State MS	Zip Code 39437	Amount of Each Receipt this Period 2600		
FEC ID number of contributing federal political committee. C					
Name of Employer	Occupation				
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600			

SUBTOTAL of Receipts This Page (optional).....	4056.00
TOTAL This Period (last page this line number only).....	

14020104228

**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 108 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Roger Schaller		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 8210 Lakeshore Road		Transaction ID : SA11Ai-CN6218
City Burtchville	State MI		Zip Code 48059-1324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Schaller Tool and Die Co.	Occupation Management	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. Mr. Neil Scrimshire		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 9 Heritage Trail		Transaction ID : SA11Ai-CN2006
City Laurel	State MS		Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Venture Oil	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) C. Mrs. Patty Scrimshire		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 9 Heritage Trail		Transaction ID : SA11Ai-CN2007
City Laurel	State MS		Zip Code 39440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

SUBTOTAL of Receipts This Page (optional).....	, , .	6200.00
TOTAL This Period (last page this line number only).....	, , .	.

14020104229

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 109 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) David Sennett		Date of Receipt M M / D D / Y Y Y Y 12 04 / 2013
Mailing Address 4841 Woodland Avenue		Transaction ID : SA11Ai-CN6072
City Western Springs	State IL	
Zip Code 60558-1746		Amount of Each Receipt this Period , , 1000 .
FEC ID number of contributing federal political committee. C		
Name of Employer Strategic Solutions Inc	Occupation Systems Manager	, , 1000 .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000 .	

Full Name (Last, First, Middle Initial) Allen Simon		Date of Receipt M M / D D / Y Y Y Y 11 23 / 2013
Mailing Address 1383 N Criss St		Transaction ID : SA11Ai-CN5992
City Chandler	State AZ	
Zip Code 85226-1307		Amount of Each Receipt this Period , , 1000 .
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	, , 1000 .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1000 .	

Full Name (Last, First, Middle Initial) Allen Simon		Date of Receipt M M / D D / Y Y Y Y 11 30 / 2013
Mailing Address 1383 N Criss St		Transaction ID : SA11Ai-CN1640
City Chandler	State AZ	
Zip Code 85226-1307		Amount of Each Receipt this Period , , 100 .
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	, , 100 .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1100 .	

SUBTOTAL of Receipts This Page (optional).....	, , 2100.00 .
TOTAL This Period (last page this line number only).....	, , .

14020104230

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 OF 166

(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	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Allen Simon		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 1383 N Criss St		Transaction ID : SA11Ai-CN6164
City Chandler	State AZ		Zip Code 85226-1307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer n.a.	Occupation Retired	, , 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 1600

Full Name (Last, First, Middle Initial) B. Allen Simon		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 1383 N Criss St		Transaction ID : SA11Ai-CN5419
City Chandler	State AZ		Zip Code 85226-1307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer n.a.	Occupation Retired	, , 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	, , 1000

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5671
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period
Name of Employer	Occupation	, , 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	Earmarked contribution-Allen Simon [MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
		, , 32244

SUBTOTAL of Receipts This Page (optional).....	, , 1500.00
TOTAL This Period (last page this line number only).....	, , .

14020104231

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 111 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Allen Simon		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1383 N Criss St City Chandler State AZ Zip Code 85226-1307		Transaction ID : SA11Ai-CN5750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) B. Allen Simon		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 1383 N Criss St City Chandler State AZ Zip Code 85226-1307		Transaction ID : SA11Ai-CN5840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) C. Barry C. Smith		Date of Receipt M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 351 Ingleside Dr. City Madison State MS Zip Code 39110		Transaction ID : SA11Ai-CN5737
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

14020104232

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 112 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Clara Smith		Date of Receipt M M / D D / Y Y Y Y 12 30 / 2013
A. Mailing Address P.O. Box 2938		Transaction ID : SA11Ai-CN5729
City Laurel	State MS		Zip Code 39442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Mr. J. Lavon Smith		Date of Receipt M M / D D / Y Y Y Y 11 15 / 2013
B. Mailing Address 4 Willow Bend Dr. Ste 2a		Transaction ID : SA11Ai-CN156
City Hattiesburg	State MS		Zip Code 39402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Jason Smith		Date of Receipt M M / D D / Y Y Y Y 12 19 / 2013
C. Mailing Address P.O. Box 1987		Transaction ID : SA11Ai-CN5487
City Laurel	State MS		Zip Code 39441-1987
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Boots & Smith	Occupation Owner	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

SUBTOTAL of Receipts This Page (optional).....	, , 4100.00
TOTAL This Period (last page this line number only).....	, , *

14020104233

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 113 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Melanie Sojourner		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 438 Upper Kingston Rd.		Transaction ID : SA11Ai-CN2770
City Natchez	State MS	
Zip Code 39120		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Crye-Leike Stedman Realtors	Occupation Real Estate Agent	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Melanie Sojourner		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 438 Upper Kingston Rd.		Transaction ID : SA11Ai-CN2772
City Natchez	State MS	
Zip Code 39120		Amount of Each Receipt this Period 450
FEC ID number of contributing federal political committee. C		
Name of Employer Crye-Leike Stedman Realtors	Occupation Real Estate Agent	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 950	

Full Name (Last, First, Middle Initial) A. Soper		Date of Receipt M M / D D / Y Y Y Y 11 08 2013
Mailing Address 75 Beaver Brook Road		Transaction ID : SA11Ai-CN5644
City Lyme	State CT	
Zip Code 06371-3202		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

14020104234

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 114 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 26104

Date of Receipt
 M M / D D / Y Y Y Y
 11 08 2013

Transaction ID : SA11C-CN5653

Amount of Each Receipt this Period
 , , 250

Earmarked contribution-A. Soper

[MEMO ITEM]
 Total earmarked through conduit. PAC limit not affected.

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

Mailing Address 75 Beaver Brook Road

City	State	Zip Code
Lyme	CT	06371-3202

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

Name of Employer	Occupation
n/a	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 250

Date of Receipt
 M M / D D / Y Y Y Y
 11 01 2013

Transaction ID : SA11Ai-CN5973

Amount of Each Receipt this Period
 , , 250

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

Mailing Address 450 Purchase Street

City	State	Zip Code
Purchase	NY	10580

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 1000

Date of Receipt
 M M / D D / Y Y Y Y
 11 25 2013

Transaction ID : SA11Ai-CN358

Amount of Each Receipt this Period
 , , 1000

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	, , *

14020104235

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Mr. Hubert Stiles Jr

Mailing Address 915 Rolandvue Rd.

City State Zip Code
Towson MD 21204-6814

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

Name of Employer Occupation
T Rowe Price retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 18 / 2013

Transaction ID : SA11Ai-CN5896

Amount of Each Receipt this Period
202

B. Full Name (Last, First, Middle Initial)
Mr. Hubert Stiles Jr

Mailing Address 915 Rolandvue Rd.

City State Zip Code
Towson MD 21204-6814

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

Name of Employer Occupation
T Rowe Price retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 25 / 2013

Transaction ID : SA11Ai-CN231

Amount of Each Receipt this Period
202

C. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 25 / 2013

Transaction ID : SA11C-CN275

Amount of Each Receipt this Period
202

Earmarked contribution-Hubert Stiles

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... 404.00

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

14020104236

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 OF 166
(check only one)
 1.1a 1.1b 1.1c 1.1d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Hubert Stiles

Mailing Address
915 Rolandvue Rd.
City State Zip Code
Towson MD 21204-6814

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

Name of Employer Occupation
T Rowe Price retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 18 2013

Transaction ID : SA11Ai-CN5402

Amount of Each Receipt this Period
202

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

Mailing Address 159 Denny Way Apt 509
City State Zip Code
Seattle WA 98109-4492

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

Name of Employer Occupation
GLADYS RUBINSTEIN BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 31 2013

Transaction ID : SA11Ai-CN3865

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Nathan Stringer

Mailing Address P.O. Box 126
City State Zip Code
Stringer MS 39481

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

Name of Employer Occupation
B & R Industrial Supply Inc. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 19 2013

Transaction ID : SA11Ai-CN2055

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional)..... 3202.00

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

14020104237

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 117 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) Frank H. Suits Jr.		Date of Receipt M M / D D / Y Y Y Y 12 27 / 2013	
Mailing Address 4545 Cosmos Hill Rd		Transaction ID : SA11Ai-CN4236	
City Cortland	State NY	Zip Code 13045-9186	Amount of Each Receipt this Period , , 2000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2000	
Name of Employer SUIT-KOTE CORP	Occupation OWNER	Election Cycle-to-Date , , 2000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 2000	

B. Full Name (Last, First, Middle Initial) Mr. Andrew L. Sullivan		Date of Receipt M M / D D / Y Y Y Y 12 18 / 2013	
Mailing Address 7748 Western Avenue		Transaction ID : SA11Ai-CN6206.	
City Omaha	State NE	Zip Code 68114-1760	Amount of Each Receipt this Period , , 30
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 220	
Name of Employer Marriott International	Occupation tech support	Election Cycle-to-Date , , 220	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 220	

C. Full Name (Last, First, Middle Initial) Mr. Raymond Suter		Date of Receipt M M / D D / Y Y Y Y 11 27 / 2013	
Mailing Address 7010 NW 95th Ave		Transaction ID : SA11Ai-CN1650	
City Tamarac	State FL	Zip Code 33321-3045	Amount of Each Receipt this Period , , 50
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 225	
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date , , 225	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 225	

SUBTOTAL of Receipts This Page (optional).....	, , 2080.00
TOTAL This Period (last page this line number only).....	, ,

14020104238

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 OF 166
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Mr. Raymond Suter

Mailing Address 7010 NW 95th Ave

City State Zip Code
Tamarac FL 33321-3045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
12 31 2013

Transaction ID : SA11Ai-CN4563

Amount of Each Receipt this Period
25

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

Mailing Address 415 N. Magnolia Street

City State Zip Code
Laurel MS 39440

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

Name of Employer Occupation
Trustpoint LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
M M / D D / Y Y Y Y
12 31 2013

Transaction ID : SA11Ai-CN5486

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
Marilyn J. Taylor

Mailing Address 804 Tobaccoport Rd.

City State Zip Code
Bumpus Mills TN 37028

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

Name of Employer Occupation
Retired Retired Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300

Date of Receipt
M M / D D / Y Y Y Y
12 30 2013

Transaction ID : SA11Ai-CN5477

Amount of Each Receipt this Period
1300

SUBTOTAL of Receipts This Page (optional)..... 2825.00

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

14020104239

**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 119 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) John Terril		Date of Receipt
Mailing Address 489 Rosslare Dr		M M / D D / Y Y Y Y 12 30 2013
City	State	Zip Code
Weldon Spring	MO	63304-0305
FEC ID number of contributing federal political committee. C		Transaction ID : SA11Ai-CN4135
Name of Employer TERRIL & COMPANY		Occupation INVESTMENT ADVISOR
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period 250

Full Name (Last, First, Middle Initial) Mr. Craig Vechorik		Date of Receipt
Mailing Address 69 Earles Fork Rd		M M / D D / Y Y Y Y 10 17 2013
City	State	Zip Code
Sturgis	MS	39769
FEC ID number of contributing federal political committee. C		Transaction ID : SA11Ai-CN5
Name of Employer self		Occupation retail motorcycle parts
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period 2600

Full Name (Last, First, Middle Initial) Elaine Vechorik		Date of Receipt
Mailing Address 69 Earles Fork Rd		M M / D D / Y Y Y Y 10 17 2013
City	State	Zip Code
Sturgis	MS	39769
FEC ID number of contributing federal political committee. C		Transaction ID : SA11Ai-CN3
Name of Employer self		Occupation retail motorcycle parts
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date
		Amount of Each Receipt this Period 2600

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

14020104240

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Eric Vigen

Mailing Address 23642 Clover Trl

City Calabasas State CA Zip Code 91302-2007

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

Name of Employer **AIRESPRING INC.** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 31 2013

Transaction ID : **SA11AI-CN3898**

Amount of Each Receipt this Period
249

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

Mailing Address 1105 North 6th Avenue

City Laurel State MS Zip Code 39442

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 13 2013

Transaction ID : **SA11AI-CN5475**

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Jean Ward-Bobadilla

Mailing Address PO Box 231847

City Encinitas State CA Zip Code 92023-1847

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 19 2013

Transaction ID : **SA11AI-CN2720**

Amount of Each Receipt this Period
924

SUBTOTAL of Receipts This Page (optional)..... 3773.00

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

14020104241

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Michael Watson		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 5402 Hilltop Street		Transaction ID : SA11Ai-CN2771
City Pascagoula	State MS		Zip Code 39567
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer State of Mississippi	Occupation State Senator	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) B. Stephen Weiss		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 9025 Keith Avenue Unit 301		Transaction ID : SA11Ai-CN5425
City West Hollywood	State CA		Zip Code 90069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500
Name of Employer Protelindo	Occupation Senior Advisor	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) C. Club for Growth Pac Candidate Contributions		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5712
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 1500
Name of Employer	Occupation	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 37597	
		Earmarked contribution-Stephen Weiss
		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

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

14020104242

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 122 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Stephen Weiss		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address 9025 Keith Avenue Unit 301		Transaction ID : SA11Ai-CN6208
City West Hollywood	State CA	
Zip Code 90069		Amount of Each Receipt this Period 1500
FEC ID number of contributing federal political committee. C		
Name of Employer Protelindo	Occupation Senior Advisor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) Mr. Peter J. Weldon		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 700 Via. Lombardy		Transaction ID : SA11Ai-CN5888
City Winter Park	State FL	
Zip Code 32789-1527		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Mr. Peter J. Weldon		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 700 Via. Lombardy		Transaction ID : SA11Ai-CN185
City Winter Park	State FL	
Zip Code 32789-1527		Amount of Each Receipt this Period 5200
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

SUBTOTAL of Receipts This Page (optional).....	6700.00
TOTAL This Period (last page this line number only).....	

14020104243

**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 123 OF 166
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 10 25 / 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN278
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period 2600 Earmarked contribution-Peter Weldon
FEC ID number of contributing federal political committee. C C00432260		
Name of Employer	Occupation	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6680	

Full Name (Last, First, Middle Initial) Mr. Peter J. Weldon		Date of Receipt M M / D D / Y Y Y Y 11 15 / 2013
Mailing Address 700 Via. Lombardy		Transaction ID : SA11Ai-CN5980
City Winter Park	State FL	
Zip Code 32789-1527		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800	

Full Name (Last, First, Middle Initial) Peter Weldon		Date of Receipt M M / D D / Y Y Y Y 10 18 / 2013
Mailing Address 700 Via. Lombardy		Transaction ID : SA11Ai-CN5394
City Winter Park	State FL	
Zip Code 32789-1527		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer n.a.	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

14020104244

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 18 2013

Transaction ID : SA11C-CN5658

Amount of Each Receipt this Period
2600
Earmarked contribution-Peter Weldon

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
Jon S. Widener

Mailing Address 8 Kittingham Court

City Laurel State MS Zip Code 39443

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 30 2013

Transaction ID : SA11Ai-CN5731

Amount of Each Receipt this Period
1000

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

Mailing Address 5 Marina Cove

City Ridgeland State MS Zip Code 39157

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 19 2013

Transaction ID : SA11Ai-CN5730

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional)..... 1500.00

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

14020104245

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 OF 166
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Edgar Williams

Mailing Address 2900 Cove Cay Dr. # 3g

City State Zip Code
Clearwater FL 33760-1209

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

Name of Employer Occupation
Legacy Capital Group Inc. commodity pool operator

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
12 30 / 2013

Transaction ID : SA11Ai-CN6212

Amount of Each Receipt this Period
2600

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

Mailing Address
27 Myrtle Avenue

City State Zip Code
Mill Valley CA 94941-1023

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
11 27 / 2013

Transaction ID : SA11Ai-CN5416

Amount of Each Receipt this Period
1400

C. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer Occupation

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M / D D / Y Y Y Y
11 27 / 2013

Transaction ID : SA11C-CN5668

Amount of Each Receipt this Period
1400

Earmarked-James Wintersteen

[MEMO ITEM]
Total earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional)..... 4000.00

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

14020104246

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 126 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. James Wintersteen		Date of Receipt M M / D D / Y Y Y Y 11 27 2013
Mailing Address 27 Myrtle Avenue City Mill Valley State CA Zip Code 94941-1023		Transaction ID : SA11Ai-CN5417
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 2600
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 4000	

Full Name (Last, First, Middle Initial) B. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 11 27 2013
Mailing Address 2001 L St. NW Ste. 600 City Washington State DC Zip Code 20036		Transaction ID : SA11C-CN5667
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period , , 2600
Name of Employer N/A	Occupation Retired	Earmarked-James Wintersteen
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 29444	[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) C. James Wintersteen		Date of Receipt M M / D D / Y Y Y Y 11 26 2013
Mailing Address 27 Myrtle Avenue City Mill Valley State CA Zip Code 94941-1023		Transaction ID : SA11Ai-CN5989
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1400
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1400	

SUBTOTAL of Receipts This Page (optional).....	, , 4000.00
TOTAL This Period (last page this line number only).....	, ,

14020104247

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 127 OF 166
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) James Wintersteen		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 27 Myrtle Avenue		Transaction ID : SA11Ai-CN5990
City Mill Valley	State CA	
Zip Code 94941-1023		Amount of Each Receipt this Period 2600 . . .
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000 . . .	

Full Name (Last, First, Middle Initial) Louis Woodhill		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 7 Hampton CT		Transaction ID : SA11Ai-CN524
City Houston	State TX	
Zip Code 77024		Amount of Each Receipt this Period 500 . . .
FEC ID number of contributing federal political committee. C		
Name of Employer Digabit Inc.	Occupation Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500 . . .	

Full Name (Last, First, Middle Initial) Andrew Wyly		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 300 Crescent Crt. Suite 1000		Transaction ID : SA11Ai-CN5724
City Dallas	State TX	
Zip Code 75201-7852		Amount of Each Receipt this Period 300 . . .
FEC ID number of contributing federal political committee. C		
Name of Employer Andrew Wyly Film CO.	Occupation Film Maker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300 . . .	

SUBTOTAL of Receipts This Page (optional).....	3400.00 . . .
TOTAL This Period (last page this line number only).....	. . .

14020104248

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 128 OF 166
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial)
Club for Growth Pac Candidate Contributions

Mailing Address 2001 L St. NW Ste. 600

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee. **C** C00432260

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 38197

Date of Receipt
 M M / D D / Y Y Y Y
 12 31 2013

Transaction ID : SA11C-CN5726

Amount of Each Receipt this Period
 , , 300

Earmarked contribution-Andrew Wyly

[MEMO ITEM]
 Total earmarked through conduit. PAC limit not affected.

B. Full Name (Last, First, Middle Initial)
Roy M. Wyrick

Mailing Address P.O. Box 6533

City	State	Zip Code
Laurel	MS	39441-6533

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 2600

Date of Receipt
 M M / D D / Y Y Y Y
 12 12 2013

Transaction ID : SA11Ai-CN5734

Amount of Each Receipt this Period
 , , 2600

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

Mailing Address 2707 Club Lake Trail

City	State	Zip Code
McKinney	TX	75070

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

Name of Employer	Occupation
Self Employed	Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 , , 500

Date of Receipt
 M M / D D / Y Y Y Y
 12 26 2013

Transaction ID : SA11Ai-CN1275

Amount of Each Receipt this Period
 , , 500

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	, , *

14020104249

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Mr. Jeremy Lee Yancey		Date of Receipt MM / DD / YYYY 12 / 27 / 2013
Mailing Address 423 Woodlands Cir		Transaction ID : SA11Ai-CN2038
City Brandon	State MS	
Zip Code 39047		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Ms. Cindy Youell		Date of Receipt MM / DD / YYYY 11 / 25 / 2013
Mailing Address Prima Vera Cove		Transaction ID : SA11Ai-CN357
City Altamonte Springs	State FL	
Zip Code 32714		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	, , .
Self	Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) C. Robert Zadek		Date of Receipt MM / DD / YYYY 12 / 18 / 2013
Mailing Address 1001 Bridgeway Suite 721		Transaction ID : SA11Ai-CN1195
City Sausalito	State CA	
Zip Code 94965		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	, , .
buchalter nemer	attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

14020104250

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

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

FOR LINE NUMBER: PAGE 130 OF 166
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Jamie Zissis		Date of Receipt M M / D D / Y Y Y Y 12 15 2013
Mailing Address 674 Alpine Incline Villa		Transaction ID : SA11Ai-CN5738
City Incline Village	State NA		Zip Code 89451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer NA	Occupation Homemaker	, , .
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) B. Club for Growth Pac Candidate Contributions		Date of Receipt M M / D D / Y Y Y Y 12 15 2013
Mailing Address 2001 L St. NW Ste. 600		Transaction ID : SA11C-CN5740
City Washington	State DC		Zip Code 20036
FEC ID number of contributing federal political committee. C C00432260		Amount of Each Receipt this Period 250
Name of Employer	Occupation	, , . Earmarked contribution-Jamie Zissis
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 32847	
		[MEMO ITEM] Total earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		, , .
City	State		Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
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)	, , . 250.00
TOTAL This Period (last page this line number only)	, , . 316858.00

14020104251

**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 131 OF 166
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Madison Majority Project Pac		Date of Receipt M M / D D / Y Y Y Y 10 29 2013
Mailing Address P.O. Box 15179		Transaction ID : SA11C-CN281
City Washington	State DC	
Zip Code 20003-1810		Amount of Each Receipt this Period 5000 , , *
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000 , , *	

Full Name (Last, First, Middle Initial) Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 11 04 2013
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN196
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period 5000 , , *
FEC ID number of contributing federal political committee. C C00448696		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 14130 , , *	

Full Name (Last, First, Middle Initial) Senate Conservatives Fund		Date of Receipt M M / D D / Y Y Y Y 11 04 2013
Mailing Address 228 S. Washington St. #115		Transaction ID : SA11C-CN197
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period 5000 , , *
FEC ID number of contributing federal political committee. C C00448696		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 19130 , , *	

SUBTOTAL of Receipts This Page (optional)	, , 15000.00 .
TOTAL This Period (last page this line number only)	, , 15000.00 .

14020104252

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 OF 166

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) Senator Chris McDaniel		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
A. Mailing Address P.O. Box 1409		Transaction ID : SA13a-LN1
City Laurel	State Zip Code MS 39441	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Seed Money , , 100000
Name of Employer Hotman Harlow et al	Occupation Attorney	Seed Money , , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100000	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y
B. Mailing Address		Amount of Each Receipt this Period Seed Money , , *
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Seed Money , , *
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)		Date of Receipt M M / D D / Y Y Y Y
C. Mailing Address		Amount of Each Receipt this Period Seed Money , , *
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Seed Money , , *
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).....	, , 100000.00
TOTAL This Period (last page this line number only).....	, , 100000.00

14020104253

**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 133 OF 166

<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17-EX4
City	State Zip Code 55427	
Purpose of Disbursement Finance Software down payment	Candidate Name	Finance Software down payment
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 3850.00 Transaction ID : SB17-EX38
City	State Zip Code 55427	
Purpose of Disbursement software	Candidate Name	software
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C. Trail Blazer Campaign Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 3850.00 Transaction ID : SB17-EX61
City	State Zip Code 55427	
Purpose of Disbursement software	Candidate Name	software
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9700.00
TOTAL This Period (last page this line number only).....	

14020104254

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y	
Mailing Address 152 Monarch Road		10 30 2013	
City Ovett	State MS	Zip Code 39464	Amount of Each Disbursement this Period
Purpose of Disbursement Oct 2013 Contract fee		001	1500.00
Candidate Name		Category/ Type	Transaction ID : SB17-EX2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Oct 2013 Contract fee
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y	
Mailing Address 152 Monarch Road		11 15 2013	
City Ovett	State MS	Zip Code 39464	Amount of Each Disbursement this Period
Purpose of Disbursement salary		001	2500.00
Candidate Name		Category/ Type	Transaction ID : SB17-EX47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		salary
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address 152 Monarch Road		12 18 2013	
City Ovett	State MS	Zip Code 39464	Amount of Each Disbursement this Period
Purpose of Disbursement salary		001	2500.00
Candidate Name		Category/ Type	Transaction ID : SB17-EX70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		salary
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

14020104255

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y 10 16 2013	
Mailing Address 265 N. Lamar Blvd. Suite K		Amount of Each Disbursement this Period	
City Oxford	State MS	Zip Code 38655	3750.00
Purpose of Disbursement		001 Category/ Type	Transaction ID : SB17-EX5
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Administrative/Salary/Overhead Expenses
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y 10 16 2013	
Mailing Address 438 Upper Kingston Road		Amount of Each Disbursement this Period	
City Natchez	State MS	Zip Code 39120	2000.00
Purpose of Disbursement Oct 2013 Contract		001 Category/ Type	Transaction ID : SB17-EX6
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Oct 2013 Contract
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 438 Upper Kingston Road		Amount of Each Disbursement this Period	
City Natchez	State MS	Zip Code 39120	3257.69
Purpose of Disbursement Nov Payroll		001 Category/ Type	Transaction ID : SB17-EX36
Candidate Name Senator Chris McDaniel			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Nov Payroll
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	9007.69
TOTAL This Period (last page this line number only).....	

14020104256

**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)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 438 Upper Kingston Road		Amount of Each Disbursement this Period	
City Natzhez	State MS	Zip Code 39120	400.00
Purpose of Disbursement mileage		002	Transaction ID : SB17-EX40
Candidate Name Senator Chris McDaniel		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:	mileage	
Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y 12 15 2013	
Mailing Address 438 Upper Kingston Road		Amount of Each Disbursement this Period	
City Natzhez	State MS	Zip Code 39120	3257.69
Purpose of Disbursement salary		001	Transaction ID : SB17-EX69
Candidate Name Senator Chris McDaniel		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:	salary	
Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y 10 16 2013	
Mailing Address P.O. Box 155		Amount of Each Disbursement this Period	
City Flora	State MS	Zip Code 39071	3500.00
Purpose of Disbursement Oct 2013 Contract		001	Transaction ID : SB17-EX7
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:	Oct 2013 Contract	
SUBTOTAL of Disbursements This Page (optional).....		7157.69	
TOTAL This Period (last page this line number only).....			

14020104257

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

Use separate schedule(s)
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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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

A. Full Name (Last, First, Middle Initial) _____ Mailing Address P.O. Box 155 _____ City State Zip Code Flora MS 39071 Purpose of Disbursement mileage Candidate Name Senator Chris McDaniel Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014 State: _____ District: _____		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013 Amount of Each Disbursement this Period , , 400.00 Transaction ID : SB17-EX39 mileage
B. Full Name (Last, First, Middle Initial) _____ Mailing Address P.O. Box 155 _____ City State Zip Code Flora MS 39071 Purpose of Disbursement Salary Candidate Name Senator Chris McDaniel Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014 State: _____ District: _____		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013 Amount of Each Disbursement this Period , , 3000.00 Transaction ID : SB17-EX43 Salary
C. Full Name (Last, First, Middle Initial) _____ Mailing Address P.O. Box 155 _____ City State Zip Code Flora MS 39071 Purpose of Disbursement salary/expenses Candidate Name Senator Chris McDaniel Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014 State: _____ District: _____		Date of Disbursement M M / D D / Y Y Y Y 12 11 2013 Amount of Each Disbursement this Period , , 3645.60 Transaction ID : SB17-EX65 salary/expenses
SUBTOTAL of Disbursements This Page (optional)		, , 7045.60
TOTAL This Period (last page this line number only)		, ,

14020104258

**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)

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<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. Campaign Research Associates LLC

Mailing Address 6582 Irvin Court

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Issues Research

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 16 2013

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17-EX8

Issues Research

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement
Oct. 2013 Contract

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 16 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17-EX9

Oct. 2013 Contract

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement
salary

Candidate Name
Senator Chris McDaniel

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 15 2013

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17-EX45

salary

SUBTOTAL of Disbursements This Page (optional)..... 6000.00

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

14020104259

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

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

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(check only one)

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<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Mailing Address		M M / D D / Y Y Y Y 12 11 2013
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement salary	001	1500.00
Candidate Name Senator Chris McDaniel		Transaction ID : SB17-EX64
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	salary
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Mailing Address		M M / D D / Y Y Y Y 10 17 2013
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	001	1500.00
Candidate Name		Transaction ID : SB17-EX10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Administrative/Salary/Overhead Expenses
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Star Graphic INC		M M / D D / Y Y Y Y 10 16 2013
Mailing Address 2714 Government Blvd		Amount of Each Disbursement this Period
City State Zip Code Mobile AL 36606	001	12000.00
Purpose of Disbursement Wrap for Bus		Transaction ID : SB17-EX11
Candidate Name		Wrap for Bus
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

14020104260

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Cold Spark Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 307 Fourth Ave Suite 920		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17-EX12
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Political Strategy Consulting	Category/ Type 001
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Political Strategy Consulting

Full Name (Last, First, Middle Initial) B. Cold Spark Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 307 Fourth Ave Suite 920		Amount of Each Disbursement this Period 1261.02 Transaction ID : SB17-EX13
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Political Strategy Consulting	Category/ Type 001
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Political Strategy Consulting

Full Name (Last, First, Middle Initial) c. Cold Spark Media		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address 307 Fourth Ave Suite 920		Amount of Each Disbursement this Period 8715.39 Transaction ID : SB17-EX32
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Political Strategy Consulting	Category/ Type 001
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Political Strategy Consulting

SUBTOTAL of Disbursements This Page (optional)..... 13976.41
TOTAL This Period (last page this line number only).....

14020104261

**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)

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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Cold Spark Media		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 307 Fourth Ave Suite 920		Amount of Each Disbursement this Period 1735.97 Transaction ID : SB17-EX53
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Political Strategy Consulting	Political Strategy Consulting
Candidate Name Senator Chris McDaniel	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Cold Spark Media		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 307 Fourth Ave Suite 920		Amount of Each Disbursement this Period 8448.02 Transaction ID : SB17-EX57
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Political Strategy Consulting	Political Strategy Consulting
Candidate Name Senator Chris McDaniel	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Cline Tours		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address P.O. Box 1498		Amount of Each Disbursement this Period 699.00 Transaction ID : SB17-EX14
City Ridgeland	State MS	
Zip Code 39158	Purpose of Disbursement Bus rental	Bus rental
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	10882.99
TOTAL This Period (last page this line number only).....	

14020104262

**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 142 OF 166
	<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	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement
A.		M M / D D / Y Y Y Y 10 17 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement Condo rental	001	500.00
Candidate Name		Transaction ID : SB17-EX133
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Condo rental
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B.		M M / D D / Y Y Y Y 10 17 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement Condo rental	001	0.00
Candidate Name		Transaction ID : SB17-EX134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Condo rental
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Chatham Diesel Service		M M / D D / Y Y Y Y 10 17 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement RV Battery	001	210.01
Candidate Name		Transaction ID : SB17-EX16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	RV Battery
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	710.01
TOTAL This Period (last page this line number only).....	

14020104263

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Southern Tire Mart		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 2926 Ellisville Blvd.		Amount of Each Disbursement this Period 1197.17 Transaction ID : SB17-EX17
City Ellisville	State MS	
Zip Code 39437	Purpose of Disbursement Tires for Bus	Tires for Bus
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 6000 Pollock Ferry Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17-EX18
City Moss Point	State MS	
Zip Code 39562	Purpose of Disbursement Oct 2013 Contract	Oct 2013 Contract
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 6000 Pollock Ferry Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17-EX44
City Moss Point	State MS	
Zip Code 39562	Purpose of Disbursement Salary	Salary
Candidate Name Senator Chris McDaniel	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3197.17
TOTAL This Period (last page this line number only).....	

14020104264

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 166

(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y 12 11 2013	
Mailing Address 6000 Pollock Ferry Road		Amount of Each Disbursement this Period	
City Moss Point	State MS	Zip Code 39562	0.00
Purpose of Disbursement salary		001 Category/ Type	Transaction ID : SB17-EX62
Candidate Name Senator Chris McDaniel			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		salary
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y 12 11 2013	
Mailing Address 6000 Pollock Ferry Road		Amount of Each Disbursement this Period	
City Moss Point	State MS	Zip Code 39562	1538.00
Purpose of Disbursement Dec salary and expenses		001 Category/ Type	Transaction ID : SB17-EX128
Candidate Name Senator Chris McDaniel			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Dec salary and expenses
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Pilot		M M / D D / Y Y Y Y 11 15 2013	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	182.61
Purpose of Disbursement gas for bus		002 Category/ Type	Transaction ID : SB17-EX74
Candidate Name Senator Chris McDaniel			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		gas for bus
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1720.61
TOTAL This Period (last page this line number only).....	

14020104265

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

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

FOR LINE NUMBER: PAGE 145 OF 166
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y 10 30 2013	
Mailing Address 806 Highland Ct		Amount of Each Disbursement this Period	
City Brandon State MS Zip Code 39047		, , 1500.00	
Purpose of Disbursement		Transaction ID : SB17-EX22	
Candidate Name		001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
		Administrative/Salary/Overhead Expenses	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 806 Highland Ct		Amount of Each Disbursement this Period	
City Brandon State MS Zip Code 39047		, , 2500.00	
Purpose of Disbursement Salary		Transaction ID : SB17-EX41	
Candidate Name Senator Chris McDaniel		001 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
		Salary	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y 12 11 2013	
Mailing Address 806 Highland Ct		Amount of Each Disbursement this Period	
City Brandon State MS Zip Code 39047		, , 2500.00	
Purpose of Disbursement salary		Transaction ID : SB17-EX135	
Candidate Name Senator Chris McDaniel		001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
		salary	

SUBTOTAL of Disbursements This Page (optional)		6500.00	
TOTAL This Period (last page this line number only)			

14020104266

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

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

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(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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y 10 30 2013	
City State Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement Oct 2013 contract		, , 2000.00	
Candidate Name		Transaction ID : SB17-EX23	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Oct 2013 contract	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y 11 15 2013	
City State Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement salary		, , 2500.00	
Candidate Name Senator Chris McDaniel		Transaction ID : SB17-EX46	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		salary	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		M M / D D / Y Y Y Y 12 15 2013	
City State Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement salary		, , 2500.00	
Candidate Name Senator Chris McDaniel		Transaction ID : SB17-EX71	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		salary	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	, , 7000.00
TOTAL This Period (last page this line number only).....	, , *

14020104267

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y 11 04 2013	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		, , 1250.00	
Purpose of Disbursement Oct 2013 contract	001	Transaction ID : SB17-EX25	
Candidate Name	Category/ Type	Oct 2013 contract	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y 11 15 2013	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		, , 2500.00	
Purpose of Disbursement salary	001	Transaction ID : SB17-EX48	
Candidate Name Senator Chris McDaniel	Category/ Type	salary	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y 12 11 2013	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		, , 2570.03	
Purpose of Disbursement Salary and expenses	001	Transaction ID : SB17-EX131	
Candidate Name Senator Chris McDaniel	Category/ Type	Salary and expenses	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	, , 6320.03
TOTAL This Period (last page this line number only).....	, , .

14020104268

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

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

FOR LINE NUMBER: PAGE 148 OF 166
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Scruggs Photography At Studio 550		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013	
Mailing Address 550 Central Avenue		Amount of Each Disbursement this Period 2744.55 Transaction ID : SB17-EX26 Photo Shoot	
City Laurel	State MS		Zip Code 39440
Purpose of Disbursement Photo Shoot	001 Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) B. B. C. Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2013	
Mailing Address 414 W. Oak Street		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17-EX27 Rent (2 mo.)	
City Laurel	State MS		Zip Code 39440
Purpose of Disbursement Rent (2 mo.)	001 Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013	
Mailing Address		Amount of Each Disbursement this Period 2300.00 Transaction ID : SB17-EX28 Painting HQ's	
City	State		Zip Code
Purpose of Disbursement Painting HQ's	001 Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7044.55
TOTAL This Period (last page this line number only).....	.

14020104269

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. State Farm Insurance

Date of Disbursement

M M / D D / Y Y Y Y
10 / 07 / 2013

Mailing Address P.O. Box 548

Amount of Each Disbursement this Period

515.87

Transaction ID : SB17-EX29

City State Zip Code
Ellisville MS 39437

Purpose of Disbursement
Insurance for Bus

001
Category/
Type

Candidate Name

Insurance for Bus

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

B. Creative Computer

Date of Disbursement

M M / D D / Y Y Y Y
11 / 24 / 2013

Mailing Address P.O. Box 6648

Amount of Each Disbursement this Period

1215.77

Transaction ID : SB17-EX54

City State Zip Code
Laurel MS 39441

Purpose of Disbursement
website

001
Category/
Type

Candidate Name

Senator Chris McDaniel

website

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

c. Creative Computer

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2013

Mailing Address P.O. Box 6648

Amount of Each Disbursement this Period

1801.61

Transaction ID : SB17-EX58

City State Zip Code
Laurel MS 39441

Purpose of Disbursement
website

001
Category/
Type

Candidate Name

Senator Chris McDaniel

website

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 3533.25

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

14020104270

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period 558.12 Transaction ID : SB17-EX119 postage
City Laurel	State MS	
Zip Code 39440	001	
Purpose of Disbursement postage	Category/ Type	
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	

Full Name (Last, First, Middle Initial) B. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address		Amount of Each Disbursement this Period 276.00 Transaction ID : SB17-EX97 stamps
City Laurel	State MS	
Zip Code 39440	001	
Purpose of Disbursement stamps	Category/ Type	
Candidate Name Senator Chris McDaniel	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	

Full Name (Last, First, Middle Initial) C. Table 100		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address		Amount of Each Disbursement this Period 1341.60 Transaction ID : SB17-EX34 Event cost
City	State	
Zip Code	003	
Purpose of Disbursement Event cost	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	2175.72
TOTAL This Period (last page this line number only)	

14020104271

**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 151 OF 166**

<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A.		Date of Disbursement
Mailing Address 169 Old Hwy 15 South Lot 2		M M / D D / Y Y Y Y 11 15 2013
City Ellisville	State MS	Zip Code 39437
Purpose of Disbursement Nov Payroll	Candidate Name	Amount of Each Disbursement this Period 1578.12
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Transaction ID : SB17-EX35
State: District:	Category/ Type 001	Nov Payroll

B.		Date of Disbursement
Mailing Address 169 Old Hwy 15 South Lot 2		M M / D D / Y Y Y Y 12 15 2013
City Ellisville	State MS	Zip Code 39437
Purpose of Disbursement salary	Candidate Name Senator Chris McDaniel	Amount of Each Disbursement this Period 1502.82
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Transaction ID : SB17-EX68
State: District:	Category/ Type 001	salary

C. Gem Publications Inc		Date of Disbursement
Mailing Address P.O. Box 87		M M / D D / Y Y Y Y 11 15 2013
City Flora	State MS	Zip Code 39071
Purpose of Disbursement palm cards and bumper sitckers	Candidate Name	Amount of Each Disbursement this Period 3160.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Transaction ID : SB17-EX37
State: District:	Category/ Type 006	palm cards and bumper sitckers

SUBTOTAL of Disbursements This Page (optional).....	6241.72
TOTAL This Period (last page this line number only).....	

14020104272

**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
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A.		M M / D D / Y Y Y Y	
Mailing Address 13413 St Mortin Dr.		11 15 2013	
City	State	Zip Code	Amount of Each Disbursement this Period
Ocean Springs	MS	39564	
Purpose of Disbursement	Candidate Name	Category/ Type	2500.00
Salary				001
Transaction ID : SB17-EX42		Salary	
Office Sought:	House	Disbursement For: 2014	
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y	
Mailing Address 13413 St Mortin Dr.		12 11 2013	
City	State	Zip Code	Amount of Each Disbursement this Period
Ocean Springs	MS	39564	
Purpose of Disbursement	Candidate Name	Category/ Type	2500.00
salary				001
Transaction ID : SB17-EX63		salary	
Office Sought:	House	Disbursement For: 2014	
	<input checked="" type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address 414 West Oak Street		11 15 2013	
City	State	Zip Code	Amount of Each Disbursement this Period
Laurel	MS	39440	
Purpose of Disbursement	Candidate Name	Category/ Type	2500.00
Atty fees				001
Transaction ID : SB17-EX49		Atty fees	
Office Sought:	House	Disbursement For: 2014	
	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	.

14020104273

**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 153 OF 166

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 22116 Yankee Town Road		M M / D D / Y Y Y Y 11 15 2013
City Sucier	State MS	Zip Code 39574
Purpose of Disbursement salary	001	Amount of Each Disbursement this Period 1500.00
Candidate Name	Category/ Type	Transaction ID : SB17-EX50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	salary
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 22116 Yankee Town Road		M M / D D / Y Y Y Y 12 11 2013
City Sucier	State MS	Zip Code 39574
Purpose of Disbursement salary	001	Amount of Each Disbursement this Period 174.00
Candidate Name Senator Chris McDaniel	Category/ Type	Transaction ID : SB17-EX66
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	salary
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address 22116 Yankee Town Road		M M / D D / Y Y Y Y 12 15 2013
City Sucier	State MS	Zip Code 39574
Purpose of Disbursement salary	001	Amount of Each Disbursement this Period 2354.69
Candidate Name Senator Chris McDaniel	Category/ Type	Transaction ID : SB17-EX67
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	, , .	4028.69
TOTAL This Period (last page this line number only).....	, , .	.

14020104274

**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
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Hancock Highschool		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17-EX51
City	State Zip Code	
Purpose of Disbursement Coast fundraiser	003	Coast fundraiser
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

Full Name (Last, First, Middle Initial) B. The RainMakers Organization		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 5211 Port Royal Road Suite 500		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17-EX52
City	State Zip Code	
Purpose of Disbursement National fundraising	003	National fundraising
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

Full Name (Last, First, Middle Initial) C. Mississippi Power		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address P.O. Box 245		Amount of Each Disbursement this Period 117.22 Transaction ID : SB17-EX60
City	State Zip Code	
Purpose of Disbursement electric	001	electric
Candidate Name Senator Chris McDaniel	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4597.22
TOTAL This Period (last page this line number only).....	.

14020104275

**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 155 OF 166			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Deep South Heating & Air		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 32 Taylors Circle		Amount of Each Disbursement this Period , , 278.20 Transaction ID : SB17-EX59
City Laurel	State MS		Zip Code 39443
Purpose of Disbursement Electrical for Bus	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Electrical for Bus
State: District:		

Full Name (Last, First, Middle Initial) B. Happy Catfish Web Design		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 72 Technology Blvd		Amount of Each Disbursement this Period , , 3142.42 Transaction ID : SB17-EX130
City Ellisville	State MS		Zip Code 39437
Purpose of Disbursement	Candidate Name Senator Chris McDaniel	001 Category/ Type
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Administrative/Salary/Overhead Expenses
State: District:		

Full Name (Last, First, Middle Initial) c. Happy Catfish Web Design		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 72 Technology Blvd		Amount of Each Disbursement this Period , , 3000.00 Transaction ID : SB17-EX72
City Ellisville	State MS		Zip Code 39437
Purpose of Disbursement Web design	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Web design
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	, , 6420.62
TOTAL This Period (last page this line number only).....	, ,

14020104276

**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)

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<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Dollar General		M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement supplies	007	220.42
Candidate Name		Transaction ID : SB17-EX73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	supplies
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Dollar General		M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement supplies	007	53.39
Candidate Name Senator Chris McDaniel		Transaction ID : SB17-EX100
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	supplies
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Shell Service		M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement Gas for Bus	002	233.22
Candidate Name Senator Chris McDaniel		Transaction ID : SB17-EX101
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Gas for Bus
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	507.03
TOTAL This Period (last page this line number only).....	

14020104277

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

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

FOR LINE NUMBER: PAGE 157 OF 166

(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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Texaco		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address		Amount of Each Disbursement this Period 748.95 Transaction ID : SB17-EX76 Gas for Bus	
City Ellisville	State MS		Zip Code 39437
Purpose of Disbursement Gas for Bus	002 Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) B. Texaco		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address		Amount of Each Disbursement this Period 212.82 Transaction ID : SB17-EX102 Gas for Bus	
City Ellisville	State MS		Zip Code 39437
Purpose of Disbursement Gas for Bus	002 Category/ Type		
Candidate Name Senator Chris McDaniel			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) C. Summit Graphics		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013	
Mailing Address		Amount of Each Disbursement this Period 1971.56 Transaction ID : SB17-EX78 Tents	
City	State TN		Zip Code
Purpose of Disbursement Tents	001 Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2933.33
TOTAL This Period (last page this line number only).....	

14020104278

**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 158 OF 166

<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address		Amount of Each Disbursement this Period 813.20 Transaction ID : SB17-EX79
City	State Zip Code	
Purpose of Disbursement supplies	001	supplies
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

Full Name (Last, First, Middle Initial) B. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period 121.09 Transaction ID : SB17-EX104
City	State Zip Code	
Purpose of Disbursement Office Supplies	001	Office Supplies
Candidate Name Senator Chris McDaniel	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

Full Name (Last, First, Middle Initial) c. Aramark Ole Miss		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address		Amount of Each Disbursement this Period 422.65 Transaction ID : SB17-EX80
City	State Zip Code MS 38677	
Purpose of Disbursement Meal for Oxford	007	Meal for Oxford
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1356.94
TOTAL This Period (last page this line number only).....	

14020104279

**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 159 OF 166

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)
A. Office Depot

Mailing Address

City State Zip Code

Purpose of Disbursement: supplies
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY
11 / 15 / 2013

Amount of Each Disbursement this Period: 907.80
Transaction ID : SB17-EX81
supplies

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

Mailing Address

City State Zip Code

Purpose of Disbursement: Supplies
Candidate Name: Senator Chris McDaniel

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 17 / 2013

Amount of Each Disbursement this Period: 362.79
Transaction ID : SB17-EX105
Supplies

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

Mailing Address

City State Zip Code

Purpose of Disbursement: Telephone
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY
11 / 15 / 2013

Amount of Each Disbursement this Period: 727.57
Transaction ID : SB17-EX82
Telephone

SUBTOTAL of Disbursements This Page (optional).....	1998.16
TOTAL This Period (last page this line number only).....	.

14020104280

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. Chevron

Date of Disbursement

M M / D D : Y Y Y Y
12 17 : 2013

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
Gas for Bus

002

, , 416.36
Transaction ID : SB17-EX106

Candidate Name
Senator Chris McDaniel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

Gas for Bus

State: District:

Full Name (Last, First, Middle Initial)

B. Chevron

Date of Disbursement

M M / D D : Y Y Y Y
12 31 : 2013

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
Gas for Bus

002

, , 360.00
Transaction ID : SB17-EX99

Candidate Name
Senator Chris McDaniel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

Gas for Bus

State: District:

Full Name (Last, First, Middle Initial)

C. Hampton Inn

Date of Disbursement

M M / D D : Y Y Y Y
11 15 : 2013

Mailing Address

City State Zip Code
Laurel MS 39441

Amount of Each Disbursement this Period

Purpose of Disbursement
Hotel

002

, , 215.82
Transaction ID : SB17-EX84

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

Hotel

State: District:

SUBTOTAL of Disbursements This Page (optional) , , 992.18

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

14020104281

**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 161 OF 166

<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Hampton Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period 114.05 Transaction ID : SB17-EX107
City Laurel	State MS	
Zip Code 39441	Purpose of Disbursement Hotel	Category/ Type 002
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Hotel

Full Name (Last, First, Middle Initial) B. Keith Superstores		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address		Amount of Each Disbursement this Period 207.67 Transaction ID : SB17-EX109
City	State	
Zip Code	Purpose of Disbursement Gas for Bus	Category/ Type 002
Candidate Name Senator Chris McDaniel	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Gas for Bus

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address		Amount of Each Disbursement this Period 2420.93 Transaction ID : SB17-EX88
City	State	
Zip Code	Purpose of Disbursement supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	supplies

SUBTOTAL of Disbursements This Page (optional).....	2742.65
TOTAL This Period (last page this line number only).....	2742.65

14020104282

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. Vanco Services

Date of Disbursement

M M / D D / Y Y Y Y
12 / 30 / 2013

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

1045.68

Purpose of Disbursement
CC Fees

001

Transaction ID : SB17-EX125

Candidate Name
Senator Chris McDaniel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

CC Fees

State: District:

Full Name (Last, First, Middle Initial)

B. Vanco Services

Date of Disbursement

M M / D D / Y Y Y Y
12 / 31 / 2013

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

565.81

Purpose of Disbursement
cc fees

001

Transaction ID : SB17-EX127

Candidate Name
Senator Chris McDaniel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

cc fees

State: District:

Full Name (Last, First, Middle Initial)

C. Globalindus

Date of Disbursement

M M / D D / Y Y Y Y
11 / 15 / 2013

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

605.30

Purpose of Disbursement
supplies

001

Transaction ID : SB17-EX94

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

supplies

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 2216.79

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

14020104283

**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 163 OF 166			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement M M / D D / Y Y Y Y 12 17 2013
Mailing Address		Amount of Each Disbursement this Period 320.98 Transaction ID : SB17-EX113
City	State Zip Code	
Purpose of Disbursement Software	001 Category/ Type	Software
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Communtiy Bank ATM		Date of Disbursement M M / D D / Y Y Y Y 12 17 2013
Mailing Address		Amount of Each Disbursement this Period 244.00 Transaction ID : SB17-EX120
City	State Zip Code	
Purpose of Disbursement Part for Bus	002 Category/ Type	Part for Bus
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) C. Starkville Condo		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013
Mailing Address		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17-EX129
City	State Zip Code	
Purpose of Disbursement Hotels	002 Category/ Type	Hotels
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1764.98
TOTAL This Period (last page this line number only)	

14020104284

**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 164 OF 166

<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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. Oxford Condo

Date of Disbursement

M M / D D : Y Y Y Y
12 / 17 : 2013

Mailing Address

City State Zip Code
Oxford MS

Amount of Each Disbursement this Period

900.00

Purpose of Disbursement
Hotel

002
Category/
Type

Transaction ID : SB17-EX132

Candidate Name

Hotel

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

State: District:

B.

Date of Disbursement

M M / D D : Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

C.

Date of Disbursement

M M / D D : Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 900.00

TOTAL This Period (last page this line number only)..... 167672.03

14020104285

**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

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NAME OF COMMITTEE (In Full)
Friends of Chris McDaniel

Full Name (Last, First, Middle Initial)

A. Club For Growth PAC Candidate Contributions

Date of Disbursement

M M / D D / Y Y Y Y
10 / 25 / 2013

Mailing Address 2001 L St. NW Ste. 600

City State Zip Code
Washington DC 20036

Amount of Each Disbursement this Period

185.87

Purpose of Disbursement
Credit Card Processing Fee

011
Category/
Type

Transaction ID : SB21-EX1

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Primary 2014

Credit Card Processing Fee

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 185.87

TOTAL This Period (last page this line number only)..... 185.87

14020104286

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)
Friends of Chris McDaniel

Transaction ID : SC10-LN1

LOAN SOURCE Full Name (Last, First, Middle Initial) <i>[PERSONAL FUNDS]</i>		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Chris McDaniel		
Mailing Address P.O. Box 1409		
City Laurel	State MS	ZIP Code 39441

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000	.00	100000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:				
M 11	D 15	Y 2013	M 06	D 04	Y 2014	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).....	100000.00
TOTALS This Period (last page in this line only).....	100000.00

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

14020104287

Put To Open

1 4 0 2 0 **FLAT RATE ENVELOPE**
FLAT RATE POSTAGE
REGARDLESS OF WEIGHT
DOMESTIC USE ONLY

URGENT Please Rush To Addressee

CALL BEFORE FOR PICKUP OR TRACKING OF ALL YOUR PACKAGES

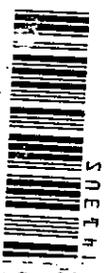
FL

DATE



EXPRESS MAIL

U.S. POSTAGE
PAID
LAUREL, MS
39440
JAN 31, 2014
AMOUNT
\$19.99
00087496-06



1007

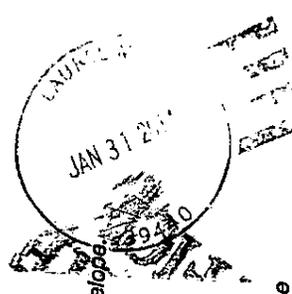
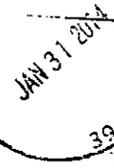
CUSTOMER USE ONLY
FROM: (PLEASE PRINT)
PHONE: () - -
ADDRESS: - - - - -
CITY: - - - - -
STATE: - - ZIP: - -

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

- SIGNATURE REQUIRED: Note: The mailer must check the "Signature Required" box on the address label. Signature required for all Priority Mail Express items. Signature required for all Registered Mail items. Signature required for all Registered Mail items. Signature required for all Registered Mail items.
- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery Required (additional fee, when available)
- 10:30 AM Delivery Required (additional fee, when available)
- Refer to USPS.com or local Post Office for availability

TO: (PLEASE PRINT)
PHONE: () - -
ADDRESS: - - - - -
CITY: - - - - -
STATE: - - ZIP: - -



corner of envelope.

to remove the

fee no matter how many
Express Mail boxes.

items inside and pay only

WRITE FIRMLY TO MAKE ALL COPIES LEGIBLE

ZIP + 4 U.S. ADDRESSES ONLY

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 Insurance included.

<input type="checkbox"/> 2-Day (MMDDYY) <input type="checkbox"/> Military		Scheduled Delivery Date (MMDDYY)	Postage \$	Insurance Fee \$	COD Fee \$
<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 12 NOON <input type="checkbox"/> 10:30 AM Delivery Fee		Scheduled Delivery Time	Return Receipt Fee \$	Line Animal Transportation Fee \$	Total Postage & Fees \$
<input type="checkbox"/> Flat Rate <input type="checkbox"/> ozs.		Weight \$	Sunday/Holiday Premium Fee \$	Acceptance Employee Initials	Employee Signature
Delivery Address (MMDDYY) Time		Delivery (POSTAL SERVICE USE ONLY)	Employee Signature		
Delivery Address (MMDDYY) Time		Delivery (POSTAL SERVICE USE ONLY)	Employee Signature		

BY THE SENATOR
POST OFFICE

Postage is the property of the U.S. Postal Service and is provided solely for use in this envelope.

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate
OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL 1/31/14
Postmark

OVERNIGHT DELIVERY SERVICE:
SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

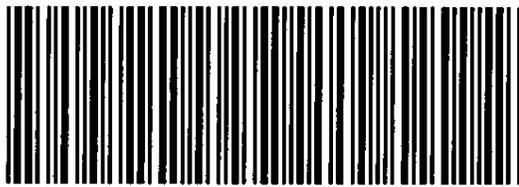
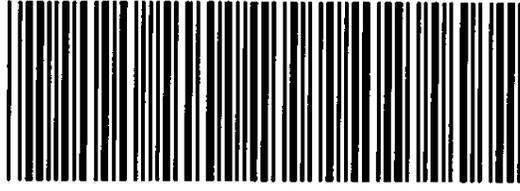
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 2/4/14

14020104289



14020104290