

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE JUN -2 PM 12:03

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

FRIENDS OF NANCY MACE

ADDRESS (number and street)

295 SEVEN FARMS DRIVE SUITE C-186

Check if different than previously reported. (ACC)

CHARLESTON

SC

29492

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00549295

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

SC

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM

5. Covering Period

MM / DD / YYYY 01 / 01 / 2014

MM / DD / YYYY 01 / 01 / 2014

MM / DD / YYYY 01 / 01 / 2014

through

MM / DD / YYYY 03 / 31 / 2014

MM / DD / YYYY 03 / 31 / 2014

MM / DD / YYYY 03 / 31 / 2014

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

Type or Print Name of Treasurer Caitlin Contestable

Signature of Treasurer

Caitlin Contestable

[Handwritten Signature]

Date

MM / DD / YYYY 05 / 29 / 2014

MM / DD / YYYY 05 / 29 / 2014

MM / DD / YYYY 05 / 29 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

14020410140

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF NANCY MACE

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y
2014			

 To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y
2014			

	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))..	213873.51	608678.59
(b) Total Contribution Refunds (from Line 20(d))..	5200.00	6135.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..	208673.51	602543.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	226672.38	382308.31
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	2965.37
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..	226672.38	379342.94
8. Cash on Hand at Close of Reporting Period (from Line 27)...	223200.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

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

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

14020410141

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 145

Write or Type Committee Name

FRIENDS OF NANCY MACE

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y
2014			

 To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y
2014			

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)...

154335.32

375530.32

(ii) Unitemized

57515.32

223925.54

(iii) TOTAL of contributions from individuals .

211850.64

599455.86

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees (such as PACs) ..

2000.00

7000.00

(d) The Candidate

22.87

2222.73

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

213873.51

608678.59

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

0.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

2965.37

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

213873.51

611643.96

14020410142

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	226672.38	382308.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	5200.00	6135.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	5200.00	6135.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	231872.38	388443.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...	241199.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	213873.51
25. SUBTOTAL (add Line 23 and Line 24)...	455073.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	231872.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	223200.65

14020410143

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

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

FOR LINE NUMBER: PAGE 5 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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 NANCY MACE

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

Mailing Address 8825 Random Road

City Fort Worth State TX Zip Code 76179

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 03 / 03 / 2014

Transaction ID : SA11AI.18480

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3508 Lost Creek Blvd.

City Austin State TX Zip Code 78735

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 01 / 14 / 2014

Transaction ID : SA11AI.18845

Amount of Each Receipt this Period
2600.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.18617

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... 3620.00

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

14020410144

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

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

FOR LINE NUMBER: PAGE 6 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18618
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	Election Cycle-to-Date 234.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18619
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 10.00
Name of Employer	Occupation	Election Cycle-to-Date 244.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18620
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 10.00
Name of Employer	Occupation	Election Cycle-to-Date 254.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

14020410145

**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 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18621
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 259.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18622
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 264.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18623
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 269.00	

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

14020410146

**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 145
	<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18624
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 274.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18625
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 279.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18626
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 284.00	

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

14020410147

**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 145
	<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18627
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.00
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 289.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18628
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.00
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 294.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18629
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 295.00	

SUBTOTAL of Receipts This Page (optional).....	11.00
TOTAL This Period (last page this line number only).....	

14020410148

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

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

FOR LINE NUMBER: PAGE 10 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014	
Mailing Address		Transaction ID : SA11AI.18630	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
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 296.00		

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014	
Mailing Address		Transaction ID : SA11AI.18631	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
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 297.00		

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014	
Mailing Address		Transaction ID : SA11AI.18632	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
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 298.00		

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410149

**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 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) A. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address City State Zip Code		Transaction ID : SA11A1.18633
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1.00	
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 299.00	

Full Name (Last, First, Middle Initial) B. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address City State Zip Code		Transaction ID : SA11A1.18634
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1.00	
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 300.00	

Full Name (Last, First, Middle Initial) C. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address City State Zip Code		Transaction ID : SA11A1.18635
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1.00	
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 301.00	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410150

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

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

FOR LINE NUMBER: PAGE 12 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) A. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18636
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 302.00	

Full Name (Last, First, Middle Initial) B. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18637
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 303.00	

Full Name (Last, First, Middle Initial) C. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18638
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 304.00	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410151

**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 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) A. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18639
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 305.00	

Full Name (Last, First, Middle Initial) B. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18640
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 306.00	

Full Name (Last, First, Middle Initial) C. Anonymous		Date of Receipt MM / DD / YYYY 02 / 21 / 2014
Mailing Address		Transaction ID : SA11AI.18641
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 307.00	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410152

**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 145

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : SA11AI.18642

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

Name of Employer Occupation

Amount of Each Receipt this Period
1.00

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
308.00

B. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18643

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

Name of Employer Occupation

Amount of Each Receipt this Period
20.00

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
328.00

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

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18644

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

Name of Employer Occupation

Amount of Each Receipt this Period
20.00

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
348.00

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

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

41.00

14020410153

**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 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

Anonymous

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary General
 Other (specify)

Election Cycle-to-Date

358.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18645

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

Anonymous

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary General
 Other (specify)

Election Cycle-to-Date

363.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18646

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

Anonymous

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary General
 Other (specify)

Election Cycle-to-Date

368.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18647

Amount of Each Receipt this Period

5.00

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

20.00

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

14020410154

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

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

FOR LINE NUMBER: PAGE 16 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18648
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 373.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18649
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 378.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18650
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
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 383.00	

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

14020410155

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

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

FOR LINE NUMBER: PAGE 17 OF 145

(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **388.00**

Date of Receipt
 MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18651

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **393.00**

Date of Receipt
 MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18652

Amount of Each Receipt this Period
5.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **398.00**

Date of Receipt
 MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18653

Amount of Each Receipt this Period
5.00

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

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

15.00

14020410156

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

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

FOR LINE NUMBER: PAGE 18 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

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 Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.18654

Amount of Each Receipt this Period
 10.00

408.00

B. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

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 Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.18655

Amount of Each Receipt this Period
 5.00

413.00

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

Mailing Address

City State Zip Code

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 Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.18656

Amount of Each Receipt this Period
 2.00

415.00

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

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

17.00

14020410157

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

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

FOR LINE NUMBER: PAGE 19 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) A. Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18657
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 416.00	

Full Name (Last, First, Middle Initial) B. Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18658
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 417.00	

Full Name (Last, First, Middle Initial) C. Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18659
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1.00
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 418.00	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410158

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

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

FOR LINE NUMBER: PAGE 20 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18660
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 419.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18661
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 420.00	

Full Name (Last, First, Middle Initial) Anonymous		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
Mailing Address		Transaction ID : SA11AI.18662
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
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 421.00	

SUBTOTAL of Receipts This Page (optional).....	3.00
TOTAL This Period (last page this line number only).....	

14020410159

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

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

FOR LINE NUMBER: PAGE 21 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anonymous

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18663

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

Amount of Each Receipt this Period
1.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
422.00

B. Full Name (Last, First, Middle Initial)
Frank Baio

Mailing Address 1810 W 7th St

City State Zip Code
Brooklyn NY 11223

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.19778

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

Amount of Each Receipt this Period
250.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Mailing Address 125 Tideland Court

City State Zip Code
Bonneau SC 29431

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : SA11AI.18981

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

Amount of Each Receipt this Period
250.00

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

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

501.00

14020410160

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

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

FOR LINE NUMBER: PAGE 22 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Richard Bastin		Date of Receipt MM / DD / YYYY 03 / 03 / 2014	
Mailing Address 486 Mariner Dr		Transaction ID : SA11AI.18486	
City Jupiter	State FL	Zip Code 33477	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00	
Name of Employer Retired	Occupation	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Stephen Bishop		Date of Receipt MM / DD / YYYY 03 / 20 / 2014	
Mailing Address 116 Saddlemount Drive		Transaction ID : SA11AI.19052	
City Hopkins	State SC	Zip Code 29061	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer Retired	Occupation Retired	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Boykin and Co.		Date of Receipt MM / DD / YYYY 01 / 22 / 2014	
Mailing Address 2701 Rosewood Dr, Suite D		Transaction ID : SA11AI.21610	
City Charleston	State SC	Zip Code 29205	Amount of Each Receipt this Period 1600.00 In-kind - Bumper Stickers
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1600.00	
Name of Employer	Occupation	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	

14020410161

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

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

FOR LINE NUMBER: PAGE 23 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial) Paul Breed		Date of Receipt MM / DD / YYYY 02 / 19 / 2014	
Mailing Address 712 E Solan Circle		Transaction ID : SA11AI.18732	
City Solana Beach	State CA	Zip Code 92075	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1000.00	
Name of Employer Occupation		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Frank Brown		Date of Receipt MM / DD / YYYY 02 / 07 / 2014	
Mailing Address 4026 Waterfield Dr		Transaction ID : SA11AI.18399	
City Marietta	State GA	Zip Code 30066	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer Retired		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Kelvin Brown		Date of Receipt MM / DD / YYYY 03 / 20 / 2014	
Mailing Address 33 Springsdans Ln		Transaction ID : SA11AI.19058	
City Columbia	State SC	Zip Code 29229	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer Military		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

14020410162

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

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

FOR LINE NUMBER: PAGE 24 OF 145

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Kelvin Brown

Mailing Address 33 Springsdans Ln

City Columbia State SC Zip Code 29229

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

Name of Employer Military Occupation SCARNG

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 20 / 2014**

Transaction ID : SA11AI.19059

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
Robinson S Brown

Mailing Address 3600 Woodside Rd

City Louisville State OH Zip Code 44240

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

Name of Employer Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt **03 / 28 / 2014**

Transaction ID : SA11AI.19183

Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
Robinson S Brown III

Mailing Address 3600 Woodside Road

City Louisville State KY Zip Code 40222

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **01 / 15 / 2014**

Transaction ID : SA11AI.18843

Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **2250.00**

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

14020410163

**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 145

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Steven Bucher

Mailing Address 28 Sapphire Point

City Morton State IL Zip Code 61150

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt: 02 / 18 / 2014
Transaction ID : SA11AI.18723

Amount of Each Receipt this Period: 2600.00

B. Full Name (Last, First, Middle Initial)
Rj Bunch

Mailing Address 1443 Little Meadow Road

City Guilford State CT Zip Code 06437-0000

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt: 03 / 27 / 2014
Transaction ID : SA11AI.19169

Amount of Each Receipt this Period: 500.00

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

Mailing Address 2601 Wolfe Creek Road

City Walterboro State SC Zip Code 29488

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt: 03 / 10 / 2014
Transaction ID : SA11AI.18965

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 3600.00

TOTAL This Period (last page this line number only)

14020410164

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

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

FOR LINE NUMBER: PAGE 26 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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 NANCY MACE

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

Mailing Address **491 Connecticut Ave**

City **spartanburg** State **SC** Zip Code **29302**

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

Name of Employer **Retired** Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : **SA11AI.18461**

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Steven Busch

Mailing Address **9855 Litzsinger Rd**

City **St. Louis** State **MO** Zip Code **63124**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
01 / 24 / 2014

Transaction ID : **SA11AI.18383**

Amount of Each Receipt this Period
1000.00

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

Mailing Address **PO Box 2987**

City **Lakeland** State **FL** Zip Code **33806**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **SA11AI.18538**

Amount of Each Receipt this Period
200.00

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

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

3800.00

14020410165

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Dustin Calhoun

Mailing Address **PO Box 2987**

City **Lakeland** State **FL** Zip Code **33806**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 21 / 2014**

Transaction ID : **SA11AI.18552**

Amount of Each Receipt this Period **300.00**

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

Mailing Address **PO Box 11390**

City **Midland** State **TX** Zip Code **79702**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 14 / 2014**

Transaction ID : **SA11AI.18445**

Amount of Each Receipt this Period **1000.00**

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

Mailing Address **2976 Solomons Island Rd**

City **Edgewater** State **MD** Zip Code **21037**

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

Name of Employer Occupation
Self Employed Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **605.00**

Date of Receipt **03 / 15 / 2014**

Transaction ID : **SA11AI.18995**

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **1800.00**

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

14020410166

**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 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jean Carlton

Mailing Address 124 Folly Rd Blvd

City Charleston State SC Zip Code 29407

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 **3800.00**

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SA11AI.19224

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Walter Carr

Mailing Address 5806 Campbell St

City Hannahan State SC Zip Code 29410

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

Name of Employer Carr Properties Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
01 / 24 / 2014

Transaction ID : SA11AI.18378

Amount of Each Receipt this Period
500.00

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

Mailing Address 301 NORTH BROAD ST.

City MONROE State GA Zip Code 30655

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.18902

Amount of Each Receipt this Period
250.00

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

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

850.00

14020410167

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

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

FOR LINE NUMBER: PAGE 29 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Edward Carter

Mailing Address 229 Limestone Rd

City Dorchester State SC Zip Code 29437

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

Name of Employer Appraisal Service of South Carolina Occupation Real Estate Appraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt **03 / 07 / 2014**

Transaction ID : SA11AI.18498

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
Giuseppe Cecchi

Mailing Address 1700 N Moore St

City Arlington State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 18 / 2014**

Transaction ID : SA11AI.19943

Amount of Each Receipt this Period **500.00**

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

Mailing Address 20 Randolph Road

City Chestnut Hill State MA Zip Code 02467-0000

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 18 / 2014**

Transaction ID : SA11AI.19003

Amount of Each Receipt this Period **500.00**

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

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

1500.00

14020410168

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

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

FOR LINE NUMBER: PAGE 30 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Cary Chastain

Mailing Address **PO Box 21690**

City **Charleston** State **SC** Zip Code **29413**

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

Name of Employer **Moe's Southwest Grill** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 10 / 2014

Transaction ID : **SA11AI.18360**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Richard Chow

Mailing Address **105a W. Columbia St.**

City **South Whitley** State **IN** Zip Code **46787**

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

Name of Employer **Roush** Occupation **Engineer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : **SA11AI.19594**

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Jeff P Clark

Mailing Address **8 S Fork Dr**

City **Sheridan** State **WY** Zip Code **82801**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : **SA11AI.21021**

Amount of Each Receipt this Period
100.00

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

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

650.00

14020410169

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

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

FOR LINE NUMBER: PAGE 31 OF 145
(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 NANCY MACE

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

Mailing Address 3716 Maplewood Ave

City Dallas State TX Zip Code 17663

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

Name of Employer Retired Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SA11AI.18406

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
M W Cockrell

Mailing Address 309 East Main Street

City Chesterfield State SC Zip Code 29709

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

Name of Employer Cockrell Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : SA11AI.18974

Amount of Each Receipt this Period
500.00

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

Mailing Address 45 Esopus Ave

City Ulster Park State NY Zip Code 12487

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

Name of Employer Retired Occupation System Prog

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : SA11AI.18979

Amount of Each Receipt this Period
35.00

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

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

3135.00

14020410170

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

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

FOR LINE NUMBER: PAGE 32 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) Ronald Cole		Date of Receipt MM / DD / YYYY 03 / 30 / 2014	
Mailing Address 45 Esopus Ave		Transaction ID : SA11AI.19250	
City Ulster Park	State NY	Zip Code 12487	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation System Prog		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 270.00		

Full Name (Last, First, Middle Initial) Charles Conrad		Date of Receipt MM / DD / YYYY 02 / 21 / 2014	
Mailing Address 215 S. Carleila Lake Way		Transaction ID : SA11AI.18476	
City Spartanburg	State SC	Zip Code 29307	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Conrad & Assoc	Occupation Partner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Ted Conrad		Date of Receipt MM / DD / YYYY 02 / 21 / 2014	
Mailing Address 507 Perrin Dr		Transaction ID : SA11AI.18474	
City Spartanburg	State SC	Zip Code 29307	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Conrad & Assoc	Occupation Partner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1035.00
TOTAL This Period (last page this line number only).....	

14020410171

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 145
	<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 NANCY MACE

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

Mailing Address **PO Box 1345**

City **Frostproof** State **FL** Zip Code **32953**

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

Name of Employer **Cook Mfg Group Inc.** Occupation **Business Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
03 / 19 / 2014

Transaction ID : **SA11AI.20414**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Miles Cooper

Mailing Address **7600 Charles Ferry Drive**

City **Columbia** State **SC** Zip Code **29209-3008**

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

Name of Employer **Partner/VP Design** Occupation **Image Resource Group, Inc.**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
02 / 06 / 2014

Transaction ID : **SA11AI.19566**

Amount of Each Receipt this Period
50.00

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

Mailing Address **219 coosaw point blvd**

City **Beaufort** State **SC** Zip Code **29907**

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

Name of Employer **None** Occupation **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
03 / 05 / 2014

Transaction ID : **SA11AI.18926**

Amount of Each Receipt this Period
2600.00

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

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

3150.00

14020410172

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 OF 145

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
George Cousar

Mailing Address **PO Box 5471**

City **Greenville** State **SC** Zip Code **29606**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : **SA11AI.20190**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Edward Cox

Mailing Address **2703 Coventry Ln.**

City **Waukesha** State **WI** Zip Code **53188**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11AI.19672**

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ronald J Crislip

Mailing Address **2319 Tyler St**

City **Jenison** State **MI** Zip Code **22407**

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

Name of Employer Occupation
Mason

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **218.00**

Date of Receipt
MM / DD / YYYY
01 / 03 / 2014

Transaction ID : **SA11AI.20611**

Amount of Each Receipt this Period
98.00

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

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

608.00

14020410173

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 OF 145
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Kathleen Crosby

Mailing Address 214 Apac Rd

City Aiken State SC Zip Code 29801

FEC ID number of contributing federal political committee. C

Name of Employer Usps Occupation Retired Rural Carrier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 400.00

Date of Receipt 03 / 05 / 2014
Transaction ID : SA11AI.18927

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Kathleen Crosby

Mailing Address 214 Apac Rd

City Aiken State SC Zip Code 29801

FEC ID number of contributing federal political committee. C

Name of Employer Usps Occupation Retired Rural Carrier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 425.00

Date of Receipt 03 / 30 / 2014
Transaction ID : SA11AI.19258

Amount of Each Receipt this Period 25.00

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

Mailing Address 2145 Henry Tecklenburg Dr Suite 220

City Charleston State SC Zip Code 29414

FEC ID number of contributing federal political committee. C

Name of Employer Charleston Neurosurgical Assoc Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt 03 / 07 / 2014
Transaction ID : SA11AI.18499

Amount of Each Receipt this Period 600.00

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

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

725.00

14020410174

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 145
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Brian Cuddy

Mailing Address 2145 Henry Tecklenburg Dr
Suite 220

City Charleston State SC Zip Code 29414

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

Name of Employer Charleston Neurosurgical Assoc Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.22947

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
T.R. Culler

Mailing Address 205 First Street
P.O. Box 603

City Cameron State SC Zip Code 29030

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.18589

Amount of Each Receipt this Period
1000.00

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

Mailing Address 13727 Kensal Green Dr

City Charlotte State NC Zip Code 28278

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

Name of Employer Thomson Reuters Occupation Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
371.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.19068

Amount of Each Receipt this Period
50.00

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

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

1450.00

14020410175

**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 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Aj Czernecki Jr

Mailing Address **478 South Fork Drive**

City **Leesville** State **SC** Zip Code **29070**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 20 / 2014

Transaction ID : **SA11AI.19054**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Thomas Danielson

Mailing Address **14305 Morning Mountain Way**

City **Milton** State **GA** Zip Code **30328**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
01 / 04 / 2014

Transaction ID : **SA11AI.18864**

Amount of Each Receipt this Period
300.00

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

Mailing Address **3358 West 130th**

City **Cleveland** State **OH** Zip Code **44111**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014

Transaction ID : **SA11AI.18678**

Amount of Each Receipt this Period
25.00

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

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

825.00

14020410176

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 145

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
George Davenport

Mailing Address **117 Stonecrest Road**

City **Greer** State **SC** Zip Code **29650**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : **SA11AI.19111**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kenneth Davis

Mailing Address **P.o. Box 999**

City **Fort Worth** State **TX** Zip Code **76101**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
01 / 02 / 2014

Transaction ID : **SA11AI.18868**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ronald E Davis

Mailing Address **4401 Hughes Ln Spc 96**

City **Bakersfield** State **CA** Zip Code **93304**

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

Name of Employer _____ Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 19 / 2014

Transaction ID : **SA11AI.21211**

Amount of Each Receipt this Period
100.00

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

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

1600.00

14020410177

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) Paul Dinofrio		Date of Receipt MM / DD / YYYY 02 / 19 / 2014	
Mailing Address 7708 Briar Ln		Transaction ID : SA11AI.20615	
City Bellaire	State MI	Zip Code 32507	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) Paul Dinofrio		Date of Receipt MM / DD / YYYY 03 / 05 / 2014	
Mailing Address 7708 Briar Ln		Transaction ID : SA11AI.20616	
City Bellaire	State MI	Zip Code 32507	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 265.00		

Full Name (Last, First, Middle Initial) D.S. Doehrman		Date of Receipt MM / DD / YYYY 01 / 31 / 2014	
Mailing Address 7932 Grand Bay Dr		Transaction ID : SA11AI.18389	
City Naples	State FL	Zip Code 34108	Amount of Each Receipt this Period 500.00
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 500.00		

SUBTOTAL of Receipts This Page (optional).....	590.00
TOTAL This Period (last page this line number only).....	

14020410178

**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 145
	<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 NANCY MACE

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

Mailing Address 26000 Newbridge Drive

City: Los Altos Hills State: CA Zip Code: 94022

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: **600.00**

Date of Receipt: **03 / 07 / 2014**

Transaction ID : SA11AI.21218

Amount of Each Receipt this Period: **200.00**

B. Full Name (Last, First, Middle Initial)
Tom Ducker

Mailing Address 2357 Sorentrve Ave

City: North Charleston State: SC Zip Code: 29405

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: **250.00**

Date of Receipt: **01 / 10 / 2014**

Transaction ID : SA11AI.18854

Amount of Each Receipt this Period: **250.00**

C. Full Name (Last, First, Middle Initial)
Tyler B. Dunlap

Mailing Address 1770 Camden Highway

City: Sumter State: SC Zip Code: 29153

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

Name of Employer: _____ Occupation: _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date: **2000.00**

Date of Receipt: **03 / 19 / 2014**

Transaction ID : SA11AI.19011

Amount of Each Receipt this Period: **1000.00**

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

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

1450.00

14020410179

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

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

FOR LINE NUMBER: PAGE 41 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
John Easterling

Mailing Address 1016 Four Mile Branch Rd

City Spartanburg State SC Zip Code 29302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.18549

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Brian Edmonston

Mailing Address 13460 Old Winery Rd

City Poway State CA Zip Code 92064

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.18930

Amount of Each Receipt this Period
250.00

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

Mailing Address 801 South Gamer Street

City State College State PA Zip Code 16801

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Clearfield Hospital Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2014

Transaction ID : SA11AI.18780

Amount of Each Receipt this Period
500.00

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

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

1250.00

14020410180

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 145

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

Full Name (Last, First, Middle Initial) James Edwards		Date of Receipt MM / DD / YYYY 03 / 13 / 2014	
Mailing Address 801 South Garner Street		Transaction ID : SA11AI.18984	
City State College	State PA	Zip Code 16801	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer Clearfield Hospital	Occupation Physician	Amount of Each Receipt this Period 600.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4700.00	Amount of Each Receipt this Period 600.00	

Full Name (Last, First, Middle Initial) James Edwards		Date of Receipt MM / DD / YYYY 03 / 22 / 2014	
Mailing Address 801 South Garner Street		Transaction ID : SA11AI.19086	
City State College	State PA	Zip Code 16801	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Clearfield Hospital	Occupation Physician	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) Ben Elmer		Date of Receipt MM / DD / YYYY 03 / 18 / 2014	
Mailing Address 9925 Sedgewick Ave		Transaction ID : SA11AI.20832	
City Plano	State TX	Zip Code 75025	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer retired	Occupation retired	Amount of Each Receipt this Period 100.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	Amount of Each Receipt this Period 100.00	

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

14020410181

**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 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Lisa Emeott

Mailing Address 5608 Silentbrook Ln

City Rolling Meadows State IL Zip Code 60008

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

Name of Employer None Occupation Accountant, Currently Not Working

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **295.00**

Date of Receipt
MM / DD / YYYY
02 / 23 / 2014

Transaction ID : SA11AI.18702

Amount of Each Receipt this Period
8.00

B. Full Name (Last, First, Middle Initial)
Lisa Emeott

Mailing Address 5608 Silentbrook Ln

City Rolling Meadows State IL Zip Code 60008

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

Name of Employer None Occupation Accountant, Currently Not Working

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **302.00**

Date of Receipt
MM / DD / YYYY
03 / 01 / 2014

Transaction ID : SA11AI.18878

Amount of Each Receipt this Period
7.00

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

Mailing Address 745 Creekside Dr

City Mt. Pleasant State SC Zip Code 29464

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SA11AI.18422

Amount of Each Receipt this Period
500.00

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

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

515.00

14020410182

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

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

FOR LINE NUMBER: PAGE 44 OF 145
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Andrew Falatok

Mailing Address 1 Yeaman's Hall Ct

City Spartanburg State SC Zip Code 29306

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

Name of Employer Tex Mach Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **03 / 21 / 2014**

Transaction ID : SA11AI.18555

Amount of Each Receipt this Period **600.00**

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

Mailing Address 101 West End Avenue #25f

City New York State MA Zip Code 02116-0000

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 28 / 2014**

Transaction ID : SA11AI.19193

Amount of Each Receipt this Period **500.00**

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

Mailing Address 59 Krier Lane

City Mount Pleasant State SC Zip Code 29464

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 28 / 2014**

Transaction ID : SA11AI.18567

Amount of Each Receipt this Period **1000.00**

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

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

2100.00

14020410183

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

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

FOR LINE NUMBER: PAGE 45 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Richard Francis

Mailing Address PO Box 540580

City Omaha State NE Zip Code 68154

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.20781

Amount of Each Receipt this Period
500.00

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

Mailing Address 1050 Westbrooke Way

City Atlanta State GA Zip Code 30319

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.18535

Amount of Each Receipt this Period
200.00

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

Mailing Address 1050 Westbrooke Way

City Atlanta State GA Zip Code 30319

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.18578

Amount of Each Receipt this Period
200.00

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

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

900.00

14020410184

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 OF 145

(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 NANCY MACE

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

Mailing Address **105 Madison Ave**
Floor 15

City **New York** State **NY** Zip Code **10016**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 21 / 2014**

Transaction ID : **SA11AI.18557**

Amount of Each Receipt this Period **1000.00**

B. Full Name (Last, First, Middle Initial)
Alonzo Gates

Mailing Address **785 Burr Rd**

City **San Antonio** State **TX** Zip Code **78209**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **03 / 12 / 2014**

Transaction ID : **SA11AI.20947**

Amount of Each Receipt this Period **2600.00**

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

Mailing Address **2008 Shell**

City **Midland** State **TX** Zip Code **79705**

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

Name of Employer Occupation
Coc. Inc. Cob

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **02 / 19 / 2014**

Transaction ID : **SA11AI.18736**

Amount of Each Receipt this Period **100.00**

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

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

3700.00

14020410185

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Andrew Geer

Mailing Address **844 Sheldon Road**

City **Charleston** State **SC** Zip Code **29407**

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

Name of Employer **Self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : **SA11AI.19126**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Bruce Gelb

Mailing Address **111 E 56th St**
Suite 211

City **New York City** State **NY** Zip Code **10002**

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

Name of Employer **Retired** Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SA11AI.18409**

Amount of Each Receipt this Period
250.00

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

Mailing Address **PO Box 1727**

City **Spartanburg** State **SC** Zip Code **29304**

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

Name of Employer **Gibbs International** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
01 / 17 / 2014

Transaction ID : **SA11AI.18375**

Amount of Each Receipt this Period
500.00

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

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

1250.00

14020410186

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

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

FOR LINE NUMBER: PAGE 48 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Austin Gilbert

Mailing Address **Po Box 3009**

City **Florence** State **SC** Zip Code **29502**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SA11AI.19097**

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Mary Beth Glotzbach

Mailing Address **2728 Goldbug Ave**

City **Sullivans Island** State **SC** Zip Code **29482**

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

Name of Employer Occupation
Self Employed Mary Kay Sales Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **SA11AI.19160**

Amount of Each Receipt this Period
500.00

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

Mailing Address **2604 Agustus St**

City **Daniel Island** State **SC** Zip Code **29492**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : **SA11AI.18562**

Amount of Each Receipt this Period
250.00

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

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

1350.00

14020410187

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 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) Richard S Griffith		Date of Receipt MM / DD / YYYY 02 / 04 / 2014	
Mailing Address 3417 Milam St		Transaction ID : SA11AI.20793	
City Houston	State LA	Zip Code 70509	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Richard Griffith	Occupation Investor	Amount of Each Receipt this Period 400.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	Amount of Each Receipt this Period 400.00	

Full Name (Last, First, Middle Initial) George E. Ham		Date of Receipt MM / DD / YYYY 03 / 19 / 2014	
Mailing Address 4304 South Mills Street		Transaction ID : SA11AI.20743	
City Independence	State MO	Zip Code 64055	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer	Occupation	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) David Hand		Date of Receipt MM / DD / YYYY 03 / 12 / 2014	
Mailing Address 510 Gibbs St		Transaction ID : SA11AI.18516	
City Charleston	State SC	Zip Code 29492	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Thompson Companies	Occupation President	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00	

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

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

1400.00
1400.00

14020410188

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 OF 145

(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	<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 NANCY MACE

Full Name (Last, First, Middle Initial) Drew Hanna		Date of Receipt MM / DD / YYYY 03 / 26 / 2014	
Mailing Address 153 Sprig Lane		Transaction ID : SA11AI.19115	
City Murrells Inlet	State SC	Zip Code 29576	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Thomas Hannah		Date of Receipt MM / DD / YYYY 03 / 28 / 2014	
Mailing Address 837 Glendalyn Ave		Transaction ID : SA11AI.18583	
City spartanburg	State SC	Zip Code 29302	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Doris Hare		Date of Receipt MM / DD / YYYY 03 / 05 / 2014	
Mailing Address 19 Oyster Reef Dr		Transaction ID : SA11AI.20313	
City Hilton Head Island	State SC	Zip Code 29926	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation	Election Cycle-to-Date 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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

14020410189

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

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

FOR LINE NUMBER: PAGE 51 OF 145

(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jonathan Harvey

Mailing Address 1618 Jessamine Rd

City Charleston State SC Zip Code 29407

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

Name of Employer Hughey Injury Lawyers Occupation Office Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 03 / 2014**

Transaction ID : SA11AI.18485

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
Sam Hines

Mailing Address 2457 Sylvan Shores Dr

City Charleston State SC Zip Code 29414

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **02 / 07 / 2014**

Transaction ID : SA11AI.18404

Amount of Each Receipt this Period **300.00**

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

Mailing Address 1115 Woodburn Road

City Spaertanburg State SC Zip Code 29302

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 25 / 2014**

Transaction ID : SA11AI.19108

Amount of Each Receipt this Period **1000.00**

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

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

1800.00

14020410190

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

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

FOR LINE NUMBER: PAGE 52 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jane Huggin

Mailing Address **838 S Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt **MM / DD / YYYY**
01 / 17 / 2014

Transaction ID : **SA11AI.21365**

Amount of Each Receipt this Period **1400.00**

B. Full Name (Last, First, Middle Initial)
Jane Huggin

Mailing Address **838 S Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt **MM / DD / YYYY**
01 / 17 / 2014

Transaction ID : **SA11AI.22949**

Amount of Each Receipt this Period **2600.00**

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

Mailing Address **838 S Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **MM / DD / YYYY**
03 / 31 / 2014

Transaction ID : **SA11AI.21389**

Amount of Each Receipt this Period **1200.00**

SUBTOTAL of Receipts This Page (optional)..... **5200.00**

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

14020410191

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 OF 145
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Rex Huggin

Mailing Address **838 S. Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
MM / DD / YYYY
01 / 17 / 2014

Transaction ID : **SA11AI.21363**

Amount of Each Receipt this Period
1400.00

B. Full Name (Last, First, Middle Initial)
Rex Huggin

Mailing Address **838 S. Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
MM / DD / YYYY
01 / 17 / 2014

Transaction ID : **SA11AI.22948**

Amount of Each Receipt this Period
2600.00

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

Mailing Address **838 S. Parker Dr**

City **Florence** State **SC** Zip Code **29501**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21388**

Amount of Each Receipt this Period
1200.00

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

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

5200.00

14020410192

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jack Hughes

Mailing Address 180 Hart Rd

City Judsonia State AR Zip Code 72081

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2014

Transaction ID : SA11AI.18387

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jack Hughes

Mailing Address 180 Hart Rd

City Judsonia State AR Zip Code 72081

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.18590

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Samuel P Hughes

Mailing Address 310 Chessington Cir

City Summerville State SC Zip Code 29831

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

Name of Employer Occupation
Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.20143

Amount of Each Receipt this Period
200.00

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

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

400.00

14020410193

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

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

FOR LINE NUMBER: PAGE 55 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Peter Irucci

Mailing Address 323 Old Cypress Ct

City Pawleys Island State SC Zip Code 29585

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

Name of Employer Self Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SA11AI.18440

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Andrew Irvin

Mailing Address 612 Howell Dr

City Locust Grove State GA Zip Code 30248

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

Name of Employer Pyro Corp Occupation Small Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SA11AI.19231

Amount of Each Receipt this Period
250.00

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

Mailing Address 19 saint andrews drive

City jackson State MS Zip Code 39211

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SA11AI.18771

Amount of Each Receipt this Period
1000.00

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

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

2250.00

14020410194

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jim Johnson

Mailing Address P.O. Box 1144

City: Troy State: MT Zip Code: 59935

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

Name of Employer: Chlor Rid Occupation: Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 02 / 04 / 2014

Transaction ID : SA11AI.19531

Amount of Each Receipt this Period: 100.00

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

Mailing Address P.O. Box 1144

City: Troy State: MT Zip Code: 59935

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

Name of Employer: Chlor Rid Occupation: Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 325.00

Date of Receipt: 02 / 21 / 2014

Transaction ID : SA11AI.19656

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
James T Jones

Mailing Address 115 Grace Nell Dr

City: Paducah State: IL Zip Code: 60632

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 525.00

Date of Receipt: 01 / 23 / 2014

Transaction ID : SA11AI.20714

Amount of Each Receipt this Period: 500.00

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

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

700.00

14020410195

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

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

FOR LINE NUMBER: PAGE 57 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Donald H Keller

Mailing Address 10 Cape Rd

City Mendon State WA Zip Code 98057

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

Name of Employer Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **03 / 19 / 2014**
Transaction ID : SA11AI.19701

Amount of Each Receipt this Period **200.00**

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

Mailing Address 121 Cedar St.

City San Antonio State TX Zip Code 78210

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **01 / 07 / 2014**
Transaction ID : SA11AI.18857

Amount of Each Receipt this Period **1000.00**

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

Mailing Address 121 Cedar St.

City San Antonio State TX Zip Code 78210

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **01 / 22 / 2014**
Transaction ID : SA11AI.18835

Amount of Each Receipt this Period **1600.00**

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

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

2800.00

14020410196

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial) Braeden Kershner		Date of Receipt MM / DD / YYYY 02 / 01 / 2014	
Mailing Address 162 Seven Farms Drive #305		Transaction ID : SA11AI.21613	
City Charleston	State SC	Zip Code 29492	Amount of Each Receipt this Period 382.16 In-kind - Office Space (owns Black Tie Music Academy LLC)
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 382.16	
Name of Employer Black Tie Music Academy LLC	Occupation owner	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Braeden Kershner		Date of Receipt MM / DD / YYYY 03 / 01 / 2014	
Mailing Address 162 Seven Farms Drive #305		Transaction ID : SA11AI.21615	
City Charleston	State SC	Zip Code 29492	Amount of Each Receipt this Period 382.16 In-kind - Office Space (owns Black Tie Music Academy LLC)
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 764.32	
Name of Employer Black Tie Music Academy LLC	Occupation owner	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Gerald Kirke		Date of Receipt MM / DD / YYYY 01 / 07 / 2014	
Mailing Address 5465 Mills Civic Pkwy Suite 400		Transaction ID : SA11AI.18859	
City West Des Moines	State IA	Zip Code 50266	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2600.00	
Name of Employer	Occupation	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	3364.32
TOTAL This Period (last page this line number only).....	

14020410197

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Gerald Kirke

Mailing Address **5465 Mills Civic Pkwy**
Suite 400

City **West Des Moines** State **IA** Zip Code **50266**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
03 / 21 / 2014

Transaction ID : **SA11AI.18559**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Brenda Komarek

Mailing Address **2033 Turk Hill Road**

City **Fairport** State **NY** Zip Code **14450**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
01 / 24 / 2014

Transaction ID : **SA11AI.18833**

Amount of Each Receipt this Period
1000.00

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

Mailing Address **PO Box 9529**

City **Newport Beach** State **CA** Zip Code **92658**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
01 / 15 / 2014

Transaction ID : **SA11AI.21195**

Amount of Each Receipt this Period
2600.00

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

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

4600.00

14020410198

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)

<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	<input type="checkbox"/> 15

PAGE 60 OF 145

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Neal Kottkeh

Mailing Address **155 N Harbor Dr**
Apt 512

City **Chicago** State **IL** Zip Code **60601**

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

Name of Employer **Neal Kottke** Occupation **Self**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SA11AI.18426**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
aldo laghi

Mailing Address **2895 42nd ave north**

City **st petersburg** State **FL** Zip Code **33714**

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

Name of Employer **ceo** Occupation **alps south llc**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : **SA11AI.18975**

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO Box 391**

City **Isle of Palms** State **SC** Zip Code **29451**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : **SA11AI.18497**

Amount of Each Receipt this Period
1000.00

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

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

2500.00

14020410199

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)

<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
David Landwehr

Mailing Address **2837 N Edwards St.**

City **Wichita** State **KS** Zip Code **67204**

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

Name of Employer **Sales** Occupation **LT Care SOLUTIONS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
03 / 29 / 2014

Transaction ID : **SA11AI.19219**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Nathan Lausch

Mailing Address **1643B Savannah Highway, #219**

City **Charleston** State **SC** Zip Code **29407**

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

Name of Employer **Gulf Stream** Occupation **Project Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
02 / 26 / 2014

Transaction ID : **SA11AI.18701**

Amount of Each Receipt this Period
750.00

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

Mailing Address **1643B Savannah Highway, #219**

City **Charleston** State **SC** Zip Code **29407**

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

Name of Employer **Gulf Stream** Occupation **Project Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt
03 / 17 / 2014

Transaction ID : **SA11AI.19001**

Amount of Each Receipt this Period
250.00

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

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

1500.00

14020410200

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anne Leclercq

Mailing Address 120 Meeting St

City Charleston State SC Zip Code 29401

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

Name of Employer Alykon Arts & Antiques Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SA11AI.18483

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Richard Lee

Mailing Address PO Box 2113

City Orlando State FL Zip Code 32082

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

Name of Employer LeeVista Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
01 / 17 / 2014

Transaction ID : SA11AI.18371

Amount of Each Receipt this Period
2600.00

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

Mailing Address PO Box 2113

City Orlando State FL Zip Code 32082

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

Name of Employer LeeVista Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
01 / 17 / 2014

Transaction ID : SA11AI.22946

Amount of Each Receipt this Period
2600.00

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

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

6200.00

14020410201

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Herbert Alan Levin

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501

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

Name of Employer Department Of Justice Of The State Cal Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 MM / DD / YYYY
 02 / 20 / 2014

Transaction ID : SA11AI.21141

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Herbert Alan Levin

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501

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

Name of Employer Department Of Justice Of The State Cal Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **360.00**

Date of Receipt
 MM / DD / YYYY
 03 / 12 / 2014

Transaction ID : SA11AI.21142

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Herbert Alan Levin

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501

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

Name of Employer Department Of Justice Of The State Cal Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **395.00**

Date of Receipt
 MM / DD / YYYY
 03 / 20 / 2014

Transaction ID : SA11AI.21143

Amount of Each Receipt this Period
35.00

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

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

210.00

14020410202

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Fraya Lindemann

Mailing Address 1565 North Ocean Way

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 / 21 / 2014

Transaction ID : SA11AI.18554

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John Lodge

Mailing Address PO Box 96559

City State Zip Code
Houston TX 77213

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
03 / 28 / 2014

Transaction ID : SA11AI.21385

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1570 Huntingdon Trail

City State Zip Code
Atlanta GA 30350

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

Name of Employer Occupation
Bus Dev Qualcomm

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
01 / 13 / 2014

Transaction ID : SA11AI.18848

Amount of Each Receipt this Period
500.00

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

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

2000.00

14020410203

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 OF 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial)
A. Guy Mabee

Mailing Address 2555 Stagecoach Trail

City State Zip Code
Gordon TX 76453

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.19211

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Anne Mace

Mailing Address 108 North Norfolk

City State Zip Code
Goose Creek SC 29442

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

Name of Employer Occupation
Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2650.00

Date of Receipt

MM / DD / YYYY
01 / 10 / 2014

Transaction ID : SA11AI.18362

Amount of Each Receipt this Period

1100.00

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

Mailing Address 108 North Norfolk

City State Zip Code
Goose Creek SC 29442

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

Name of Employer Occupation
Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5025.00

Date of Receipt

MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SA11AI.19221

Amount of Each Receipt this Period

2375.00

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

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

4475.00

14020410204

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)

<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
James Mace

Mailing Address 108 N Norfolk Way

City: Goose Creek State: SC Zip Code: 29445

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

Name of Employer: Retired Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 01 / 10 / 2014

Transaction ID : SA11AI.18364

Amount of Each Receipt this Period: 2600.00

B. Full Name (Last, First, Middle Initial)
James Mace

Mailing Address 108 N Norfolk Way

City: Goose Creek State: SC Zip Code: 29445

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

Name of Employer: Retired Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 03 / 29 / 2014

Transaction ID : SA11AI.19227

Amount of Each Receipt this Period: 2600.00

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

Mailing Address 39 Round Top Ln

City: Gettysburg State: PA Zip Code: 17325

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 09 / 2014

Transaction ID : SA11AI.19866

Amount of Each Receipt this Period: 250.00

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

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

5450.00

14020410205

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

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

FOR LINE NUMBER: PAGE 67 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Elizabeth C Maners

Mailing Address 1980 Gray Oaks Drive

City State Zip Code
Conway SC 29526

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.19102

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kenneth Mankins

Mailing Address 808 LAVON LANE

City State Zip Code
Temple TX 76502

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
400.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014

Transaction ID : SA11AI.18724

Amount of Each Receipt this Period
100.00

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

Mailing Address 5502 W Washington Blvd

City State Zip Code
Milwaukee WI 53208

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : SA11AI.19693

Amount of Each Receipt this Period
500.00

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

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

1100.00

14020410206

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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Mark Marshall

Mailing Address **PO Box 18908**

City **Corpus Christi** State **TX** Zip Code **78480**

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

Name of Employer **Self** Occupation **Author/Investor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
03 / 07 / 2014

Transaction ID : **SA11AI.18505**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Scott Massey

Mailing Address **7 Richmond Lane**

City **Blythewood** State **SC** Zip Code **29016**

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

Name of Employer **Castle Medical** Occupation **Vice President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 12 / 2014

Transaction ID : **SA11AI.18978**

Amount of Each Receipt this Period
250.00

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

Mailing Address **121 Petigru Cir**

City **McCormick** State **SC** Zip Code **29835**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
01 / 10 / 2014

Transaction ID : **SA11AI.18356**

Amount of Each Receipt this Period
500.00

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

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

1750.00

14020410207

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Josh McAfee

Mailing Address **630 Valley Hall Dr.**

City **Atlanta** State **GA** Zip Code **30350**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : **SA11AI.19095**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gary W McCoy

Mailing Address **21785 Point Lookout Rd**

City **Leonardtown** State **MD** Zip Code **17601**

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

Name of Employer Occupation
Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2014

Transaction ID : **SA11AI.19911**

Amount of Each Receipt this Period
100.00

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

Mailing Address **88 Chestnut Street**

City **Weston** State **MA** Zip Code **02493-0000**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 06 / 2014

Transaction ID : **SA11AI.19577**

Amount of Each Receipt this Period
100.00

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

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

700.00

14020410208

**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 145			
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Caroline McQueeney

Mailing Address 1832 Maybank Hwy.

City Charleston State SC Zip Code 29412

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

Name of Employer None Occupation Home Maker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
03 / 27 / 2014

Transaction ID : SA11AI.19172

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dena Meek

Mailing Address 560 Diamond Point Dr.

City Oak Point State TX Zip Code 75068

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 **550.00**

Date of Receipt
 MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.19207

Amount of Each Receipt this Period
250.00

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

Mailing Address 1528 Sanford Rd

City Charleston State SC Zip Code 29407

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.18547

Amount of Each Receipt this Period
300.00

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

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

800.00

14020410209

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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
David Mitchell

Mailing Address 109 Whites Mill Way

City Spartanburg State SC Zip Code 29307

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

Name of Employer Occupation
Oa Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1425.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014

Transaction ID : SA11AI.18729

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
David Mitchell

Mailing Address 109 Whites Mill Way

City Spartanburg State SC Zip Code 29307

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

Name of Employer Occupation
Oa Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1525.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SA11AI.19122

Amount of Each Receipt this Period
100.00

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

Mailing Address 16608 Red Canyon Ranch Road

City Loveland State CO Zip Code 80538

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

Name of Employer Occupation
Aleph Objects, Inc. Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18951

Amount of Each Receipt this Period
2600.00

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

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

3200.00

14020410210

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
John W Moorhouse

Mailing Address **971 Pamela Cir**

City **Maineville** State **OH** Zip Code **48169**

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

Name of Employer _____ Occupation **Retired Police Officer**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20536**

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
Elizabeth M. Oleson

Mailing Address **807 4th Street**

City **Kalona** State **IA** Zip Code **52247**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : **SA11AI.18579**

Amount of Each Receipt this Period
300.00

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

Mailing Address **115 Nichols Hill Rd**

City **Washington** State **CT** Zip Code **06793-0000**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : **SA11AI.18782**

Amount of Each Receipt this Period
500.00

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

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

1040.00

14020410211

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 145
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jeffrey Overton

Mailing Address **5859 Harvour View Blvd**

City **Suffolk** State **VA** Zip Code **23435**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : **SA11AI.18570**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mildred Peery

Mailing Address **2200 Cowper**

City **Palo Alto** State **CA** Zip Code **94301**

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

Name of Employer Occupation
retired teacher **none**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : **SA11AI.19131**

Amount of Each Receipt this Period
100.00

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

Mailing Address **16 Salisbury Dr**
Apt 7118

City **Asheville** State **NC** Zip Code **28903**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : **SA11AI.18465**

Amount of Each Receipt this Period
1000.00

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

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

2100.00

14020410212

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jose Pino-Y-Torres

Mailing Address **168 SKYLINE DRIVE**

City **Milford** State **PA** Zip Code **18337**

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

Name of Employer **Self Employed** Occupation **Md**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014

Transaction ID : **SA11AI.18694**

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Donald Plunkett

Mailing Address **6065 Lake Forrest Dr
Suite 100**

City **Atlanta** State **GA** Zip Code **30328**

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

Name of Employer **Plunkett Commercial Properties** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
MM / DD / YYYY
03 / 03 / 2014

Transaction ID : **SA11AI.18481**

Amount of Each Receipt this Period
1000.00

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

Mailing Address **235 Cloud Pl**

City **West Chester** State **PA** Zip Code **19380**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : **SA11AI.18942**

Amount of Each Receipt this Period
250.00

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

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

1275.00

14020410213

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

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

FOR LINE NUMBER: PAGE 75 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Sheila Prezzano

Mailing Address **28 Murray Blvd**

City **Charleston** State **SC** Zip Code **29401**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
03 / 21 / 2014

Transaction ID : **SA11AI.18542**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Norman Pulliam

Mailing Address **812 E Main St**

City **Spartanburg** State **SC** Zip Code **29302**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
03 / 21 / 2014

Transaction ID : **SA11AI.18545**

Amount of Each Receipt this Period
250.00

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

Mailing Address **138 West Sunflower Drive**

City **Payson** State **AZ** Zip Code **85541**

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 **2600.00**

Date of Receipt
03 / 21 / 2014

Transaction ID : **SA11AI.19069**

Amount of Each Receipt this Period
1600.00

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

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

2100.00

14020410214

**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)

<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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Lenora Pusta

Mailing Address **138 West Sunflower Drive**

City **Payson** State **AZ** Zip Code **85541**

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 **3600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : **SA11AI.22945**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Elijah W Ramsey

Mailing Address **207 Kees Cir**

City **Lafayette** State **LA** Zip Code **70506**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : **SA11AI.20792**

Amount of Each Receipt this Period
150.00

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

Mailing Address **2001 North 8th Street**

City **Springfield** State **IL** Zip Code **62702**

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 **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : **SA11AI.19100**

Amount of Each Receipt this Period
25.00

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

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

1175.00

14020410215

**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 145		
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Norman E Rees

Mailing Address 2406 High Pointe Ct

City: Fairfield State: CA Zip Code: 94534

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: 235.00

Date of Receipt: 03 / 19 / 2014

Transaction ID : SA11AI.21231

Amount of Each Receipt this Period: 35.00

B. Full Name (Last, First, Middle Initial)
Aubrey Reeves

Mailing Address P.O. Box 147

City: Sheldon State: SC Zip Code: 29941

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : SA11AI.18572

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Terry L Roberts

Mailing Address 197 Oakdale Rd

City: Cheraw State: SC Zip Code: 07643-0000

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

Name of Employer: Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 210.00

Date of Receipt: 03 / 21 / 2014

Transaction ID : SA11AI.20149

Amount of Each Receipt this Period: 35.00

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

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

270.00

14020410216

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

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

FOR LINE NUMBER: PAGE 78 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Norman Rogers

Mailing Address **2627 S Bayshore Dr #1204**

City **Miami** State **FL** Zip Code **33133**

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
1500.00

Date of Receipt
02 / 13 / 2014

Transaction ID : **SA11AI.18775**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
David Rowe

Mailing Address **3740 S Ocean Blvd
Unit 601**

City **Highland Beach** State **FL** Zip Code **33487**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
03 / 07 / 2014

Transaction ID : **SA11AI.18503**

Amount of Each Receipt this Period
1000.00

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

Mailing Address **5109 Madison Creek Dr**

City **Fort Collins** State **CO** Zip Code **80528**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 / 19 / 2014

Transaction ID : **SA11AI.21000**

Amount of Each Receipt this Period
500.00

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

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

2000.00

14020410217

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Anthony Ryan

Mailing Address **393 Dorchester Rd**

City **Lyme** State **NH** Zip Code **03768-0000**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014

Transaction ID : **SA11AI.19714**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John B. Sams

Mailing Address **3235 Pignatelli Crescent**

City **Mount Pleasant** State **SC** Zip Code **29466**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : **SA11AI.18575**

Amount of Each Receipt this Period
500.00

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

Mailing Address **295 Keysfield Circle**

City **Conway** State **SC** Zip Code **29527**

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

Name of Employer **Self** Occupation **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2025.00**

Date of Receipt
MM / DD / YYYY
03 / 30 / 2014

Transaction ID : **SA11AI.19245**

Amount of Each Receipt this Period
1000.00

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

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

1750.00

14020410218

**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 145	
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Joseph Schimberg

Mailing Address **3111 Pinney Woods Ln SE**

City **Cedar Rapids** State **IA** Zip Code **52403**

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

Name of Employer **Schimberg Co.** Occupation **Owner/Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 29 / 2014

Transaction ID : **SA11AI.19225**

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Lynn Simmons

Mailing Address **5869 County Highway 27**

City **Springville** State **AL** Zip Code **79316**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
01 / 07 / 2014

Transaction ID : **SA11AI.20448**

Amount of Each Receipt this Period
100.00

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

Mailing Address **5869 County Highway 27**

City **Springville** State **AL** Zip Code **79316**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
02 / 25 / 2014

Transaction ID : **SA11AI.20447**

Amount of Each Receipt this Period
100.00

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

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

2800.00

14020410219

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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Karl Smith

Mailing Address 2320 Cherry Lane

City Florissant State MO Zip Code 63033

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

Name of Employer Disabled Occupation Disabled

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2014

Transaction ID : SA11AI.19260

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Karl Smith

Mailing Address 2320 Cherry Lane

City Florissant State MO Zip Code 63033

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

Name of Employer Disabled Occupation Disabled

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
MM / DD / YYYY
01 / 10 / 2014

Transaction ID : SA11AI.19262

Amount of Each Receipt this Period
10.00

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

Mailing Address 2320 Cherry Lane

City Florissant State MO Zip Code 63033

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

Name of Employer Disabled Occupation Disabled

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2014

Transaction ID : SA11AI.19686

Amount of Each Receipt this Period
10.00

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

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

70.00

14020410220

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 145	
	<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 NANCY MACE

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

Mailing Address **2432 Golf Oak Park**

City **Seabrook Island** State **SC** Zip Code **29455**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 07 / 2014

Transaction ID : **SA11AI.18414**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph Steiger

Mailing Address **1050 Beverly Way**

City **Altadena** State **CA** Zip Code **91001**

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

Name of Employer **BILLER** Occupation **MRS**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 17 / 2014

Transaction ID : **SA11AI.18756**

Amount of Each Receipt this Period
100.00

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

Mailing Address **1050 Beverly Way**

City **Altadena** State **CA** Zip Code **91001**

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

Name of Employer **BILLER** Occupation **MRS**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : **SA11AI.19103**

Amount of Each Receipt this Period
100.00

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

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

700.00

14020410221

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 OF 145
(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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Franklin L Stephens

Mailing Address PO Box 631

City Eastpoint State FL Zip Code 22205

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SA11AI.20371

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Joseph Strom

Mailing Address 2110 N Bellline Bld

City Columbia State SC Zip Code 29204

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SA11AI.19113

Amount of Each Receipt this Period
1000.00

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

Mailing Address 213 W Monroe Ave Ste D

City Lowell State AR Zip Code 72745

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 30 / 2014

Transaction ID : SA11AI.19249

Amount of Each Receipt this Period
250.00

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

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

1285.00

14020410222

**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 145		
	<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 NANCY MACE

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

Mailing Address 40 Brams Point Rd

City State Zip Code
Hilton Head Island SC 29926

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
01 / 10 / 2014

Transaction ID : SA11AI.18358

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Marc Stuckart

Mailing Address 40 Brams Point Road

City State Zip Code
Hilton Head Island SC 29926

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

Name of Employer Occupation
Merrill Lynch Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : SA11AI.19220

Amount of Each Receipt this Period
200.00

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

Mailing Address 7010 Nw 95ave

City State Zip Code
Tamarac FL 33321

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
300.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2014

Transaction ID : SA11AI.18860

Amount of Each Receipt this Period
100.00

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

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

800.00

14020410223

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 OF 145

(check only one)

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

Raymond Suter

Mailing Address 7010 Nw 95ave

City	State	Zip Code
Tamarac	FL	33321

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
400.00

Date of Receipt

MM	DD	YYYY
01	17	2014

Transaction ID : SA11AI.18836

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Raymond Suter

Mailing Address 7010 Nw 95ave

City	State	Zip Code
Tamarac	FL	33321

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
450.00

Date of Receipt

MM	DD	YYYY
02	05	2014

Transaction ID : SA11AI.18791

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Raymond Suter

Mailing Address 7010 Nw 95ave

City	State	Zip Code
Tamarac	FL	33321

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
475.00

Date of Receipt

MM	DD	YYYY
02	13	2014

Transaction ID : SA11AI.18774

Amount of Each Receipt this Period

25.00

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

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

175.00

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14020410224

**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 145
	<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 NANCY MACE

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

Mailing Address 7010 Nw 95ave

City Tamarac State FL Zip Code 33321

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 **525.00**

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.18946

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mary Swain

Mailing Address 850 River Road

City Woodruff State SC Zip Code 29388

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 17 / 2014

Transaction ID : SA11AI.19000

Amount of Each Receipt this Period
1100.00

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

Mailing Address 3010 Memorial Drive

City Charleston State SC Zip Code 29414

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 03 / 2014

Transaction ID : SA11AI.18880

Amount of Each Receipt this Period
250.00

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

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

1400.00

14020410225

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

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

FOR LINE NUMBER: PAGE 87 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Winston Taylor

Mailing Address **PO Box 397**

City **Spartanburg** State **SC** Zip Code **29304**

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 **1500.00**

Date of Receipt
03 / 21 / 2014

Transaction ID : **SA11AI.18550**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James C Thompson

Mailing Address **12 Fairway Village Ln**

City **Isle Of Palms** State **SC** Zip Code **99301**

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

Name of Employer Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
02 / 19 / 2014

Transaction ID : **SA11AI.20121**

Amount of Each Receipt this Period
500.00

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

Mailing Address **PO Box 221**

City **Port Washington** State **OH** Zip Code **43837**

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 **250.00**

Date of Receipt
02 / 07 / 2014

Transaction ID : **SA11AI.18411**

Amount of Each Receipt this Period
50.00

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

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

1050.00

14020410226

**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 88 OF 145			
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Matthew Thompson

Mailing Address 1040 Cliffwood Drive

City State Zip Code
Mt. Pleasant SC 29464

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.18977

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Kimberlee Timbrook Brown

Mailing Address 1608-C Marsh Harbor Ln

City State Zip Code
Mount Pleasant SC 29464

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

Name of Employer Occupation
Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2025.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.18560

Amount of Each Receipt this Period
1000.00

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

Mailing Address 7119 East Shea Boulevard

City State Zip Code
Scottsdale AZ 85254

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

Name of Employer Occupation
Self-employed Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.18945

Amount of Each Receipt this Period
250.00

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

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

2250.00

14020410227

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

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

FOR LINE NUMBER: PAGE 89 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

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

Mailing Address 1909 Canterbury Street

City Irving State TX Zip Code 75062

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11AI.20847

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Victor E Van Damme

Mailing Address 5113 Patricia Ave

City Las Vegas State NV Zip Code 89130

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.21092

Amount of Each Receipt this Period
200.00

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

Mailing Address 1704 Parkside Dr

City Pasadena State TX Zip Code 77502

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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SA11AI.20919

Amount of Each Receipt this Period
100.00

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

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

350.00

14020410228

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 OF 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Thomas Van Horn

Mailing Address 105 Stratford Dr.

City State Zip Code
Goose Creek SC 29445

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

Name of Employer Occupation
None Retired From Bellsouth

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014

Transaction ID : SA11AI.20119

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Emery Villeneuve

Mailing Address 3409 Chantz Court

City State Zip Code
Florence SC 29501

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.19204

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Robert L Walden

Mailing Address 34 NW 1144 Private Rd

City State Zip Code
Leeton MO 64761

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

Name of Employer Occupation
Retired USAF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : SA11AI.20757

Amount of Each Receipt this Period
35.00

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

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

235.00

14020410229

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 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial)

Brad Wareham

Mailing Address 26 Fenner Ave

City State Zip Code
Asheville NC 28804

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/

Transaction ID : SA11AI.18891

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Marshall P Washburn

Mailing Address 115 Turnberry Dr

City State Zip Code
Spartanburg SC 20910

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Milliken Co. Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/

Transaction ID : SA11AI.20084

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

George Waters

Mailing Address 412 Rice Hope Dr

City State Zip Code
Mount Pleasant SC 29464

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/

Transaction ID : SA11AI.18513

Amount of Each Receipt this Period

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

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

14020410230

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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
John Watkins

Mailing Address **4150 Col Vanderhorst Circle**

City **Mt Pleasant** State **SC** Zip Code **29466**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : **SA11AI.19020**

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Jack E Weeks

Mailing Address **606 E 2nd St**

City **Woodward** State **IA** Zip Code **28312**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
02 / 26 / 2014

Transaction ID : **SA11AI.20627**

Amount of Each Receipt this Period
100.00

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

Mailing Address **13411 Kimberley Lane**

City **Houston** State **TX** Zip Code **77079**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : **SA11AI.19186**

Amount of Each Receipt this Period
2600.00

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

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

2725.00

14020410231

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Walter White

Mailing Address 13411 Kimberley Lane

City Houston State TX Zip Code 77079

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

Name of Employer Economy Mud Products Company Occupation Ceo

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.22950

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Shan Whitfield

Mailing Address 16417 Paulina St

City Markham State IL Zip Code 60428

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

Name of Employer Divine Capital Occupation Aerospace Venture Capitalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.18507

Amount of Each Receipt this Period
5200.00

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

Mailing Address 85 Shady Ln

City Strasburg State VA Zip Code 22657

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
 01 / 02 / 2014

Transaction ID : SA11AI.19950

Amount of Each Receipt this Period
400.00

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

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

8200.00

14020410232

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 145

(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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. George Williams

Mailing Address 85 Shady Ln

City State Zip Code
Strasburg VA 22657

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt

MM / DD / YYYY
02 / 19 / 2014

Transaction ID : SA11AI.19949

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. George Williams

Mailing Address 85 Shady Ln

City State Zip Code
Strasburg VA 22657

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt

MM / DD / YYYY
03 / 25 / 2014

Transaction ID : SA11AI.19951

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. George Williams

Mailing Address 85 Shady Ln

City State Zip Code
Strasburg VA 22657

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt

MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.19952

Amount of Each Receipt this Period

400.00

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

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

850.00

14020410233

**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 145
	<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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
Herschel D Williams

Mailing Address **9453 Jamaica Bch**

City **Galveston** State **OR** Zip Code **97423**

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

Name of Employer _____ Occupation **Sales/Owner**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
03 / 19 / 2014

Transaction ID : **SA11AI.19012**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
J.G. Wilson

Mailing Address **20 Gibbes Ct**

City **Columbia** State **SC** Zip Code **29201**

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

Name of Employer **Wilson Kibler** Occupation **Real estate**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 03 / 2014

Transaction ID : **SA11AI.18495**

Amount of Each Receipt this Period
500.00

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

Mailing Address **4040 Sadler Dr**

City **Suffolk** State **VA** Zip Code **23434**

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

Name of Employer **Raytheon** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **220.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **SA11AI.19152**

Amount of Each Receipt this Period
25.00

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

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

625.00

14020410234

**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)

<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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Scott Wizeman

Mailing Address 3260 Townsend Drive

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
Primelending, A Plainscapital Company Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : SA11AI.18455

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Scott Wizeman

Mailing Address 3260 Townsend Drive

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
Primelending, A Plainscapital Company Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.18543

Amount of Each Receipt this Period
250.00

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

Mailing Address 913 Watermelon Run

City State Zip Code
Charleston SC 29412

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

Name of Employer Occupation
Sc Federal Credit Union President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2014

Transaction ID : SA11AI.19004

Amount of Each Receipt this Period
1100.00

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

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

1600.00

14020410235

**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 145
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Geraldine Wynn

Mailing Address 138 Turnvery Dr

City Spartanburg State SC Zip Code 29306

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

Name of Employer Retired Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
02 / 21 / 2014

Transaction ID : SA11AI.18463

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Leo Yakutis

Mailing Address 134 Spinnaker Bay Lane

City Lake Wylie State SC Zip Code 29710

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

Name of Employer Humint Group International Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **415.00**

Date of Receipt
03 / 29 / 2014

Transaction ID : SA11AI.19232

Amount of Each Receipt this Period
350.00

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

Mailing Address 351 Prima Vera Cove

City Altamonte Springs State FL Zip Code 32714

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
01 / 15 / 2014

Transaction ID : SA11AI.18841

Amount of Each Receipt this Period
500.00

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

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

3450.00

14020410236

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 OF 145
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

A. Full Name (Last, First, Middle Initial)
Jonathan Zucker

Mailing Address **1527 Regimental Ln**

City **Johns Island** State **SC** Zip Code **29455**

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

Name of Employer **InterTech** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
02 / 07 / 2014

Transaction ID : **SA11A1.18402**

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

1000.00

154335.32

14020410237

**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 145

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 NANCY MACE

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION FOR GUN RIGHTS INC PAC

Mailing Address **501 E. MAIN STREET**
SUITE 200

City **WINDSOR** State **CO** Zip Code **80550**

FEC ID number of contributing federal political committee. **C C00481200**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
03 / 03 / 2014

Transaction ID : **SA11C.21381**

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

2000.00

2000.00

14020410238

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 145

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
<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 NANCY MACE

Full Name (Last, First, Middle Initial)
NANCY MACE

A.

Mailing Address **295 SEVEN FARMS DRIVE SUITE C-186**

City State Zip Code
CHARLESTON SC 29492

FEC ID number of contributing federal political committee. **C S4SC00281**

Name of Employer Candidate Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2203.46

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	15	2014

Transaction ID : **SA11D.21619**

Amount of Each Receipt this Period

3.60

In-kind - Office supplies

B.

Full Name (Last, First, Middle Initial)
NANCY MACE

Mailing Address **295 SEVEN FARMS DRIVE SUITE C-186**

City State Zip Code
CHARLESTON SC 29492

FEC ID number of contributing federal political committee. **C S4SC00281**

Name of Employer Candidate Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2222.73

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	03	2014

Transaction ID : **SA11D.21617**

Amount of Each Receipt this Period

19.27

In-kind - Food and Beverage

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	D D D	Y Y Y Y Y Y

Amount of Each Receipt this Period

--

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

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

22.87

22.87

14020410239

**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 NANCY MACE

A. Active Engagement

Full Name (Last, First, Middle Initial)

Mailing Address 44084 Riverside Parkway
Suite 350

City Lansdowne State VA Zip Code 20176

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 13 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.21491

Category/Type: 003

B. Active Engagement

Full Name (Last, First, Middle Initial)

Mailing Address 44084 Riverside Parkway
Suite 350

City Lansdowne State VA Zip Code 20176

Purpose of Disbursement Online Advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.21412

Category/Type: 003

C. Alex Allman

Full Name (Last, First, Middle Initial)

Mailing Address 1911 Brookstone Way
Apt. 204

City Rock Hill State SC Zip Code 29732

Purpose of Disbursement Intern

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2014

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.21468

Category/Type: 001

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

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

715.00

14020410240

**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 102 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Alex Allman

Mailing Address 1911 Brookstone Way
Apt. 204

City State Zip Code
Rock Hill SC 29732

Purpose of Disbursement
Intern

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 06 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21471

Full Name (Last, First, Middle Initial)

B. Alex Allman

Mailing Address 1911 Brookstone Way
Apt. 204

City State Zip Code
Rock Hill SC 29732

Purpose of Disbursement
Inter

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 07 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.21461

Full Name (Last, First, Middle Initial)

c. Black Tie Music Academy

Mailing Address 162 Seven Farms Drive
#305

City State Zip Code
Charleston SC 29492

Purpose of Disbursement
Office Space Rent

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 04 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.21498

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

1300.00

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

14020410241

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Black Tie Music Academy

Mailing Address 162 Seven Farms Drive
#305

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Office Space Rent

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.21500

Full Name (Last, First, Middle Initial)

B. Boykin and Co.

Mailing Address 2701 Rosewood Dr, Suite D

City Charleston State SC Zip Code 29205

Purpose of Disbursement
In-kind - Bumper Stickers

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 22 / 2014

Amount of Each Disbursement this Period

1600.00

Transaction ID : SB17.21612

Full Name (Last, First, Middle Initial)

C. Colortree

Mailing Address 8000 Villa Park Dr

City Richmond State VA Zip Code 23228

Purpose of Disbursement
Printing and Mailshop

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

3004.00

Transaction ID : SB17.21533

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

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

5604.00

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14020410242

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Colortree

Mailing Address 8000 Villa Park Dr

City Richmond State VA Zip Code 23228

Purpose of Disbursement
Printing and Mailshop

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

1109.00

Transaction ID : SB17.21534

Full Name (Last, First, Middle Initial)

B. Comcast

Mailing Address 4400 Belle Oaks Dr

City N. Charleston State SC Zip Code 29407

Purpose of Disbursement
Internet Service

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

279.70

Transaction ID : SB17.21481

Full Name (Last, First, Middle Initial)

c. Corporate Press, Inc.

Mailing Address 9700 Philadelphia Court

City Lanham State MD Zip Code 20706

Purpose of Disbursement
Printing and Mailshop

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

940.44

Transaction ID : SB17.21535

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

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

2329.14

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14020410243

**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 105 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies

Mailing Address 717 King Street
suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
01	02	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.21495

B. DB Capitol Strategies

Mailing Address 717 King Street
suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
01	15	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.21495

C. DB Capitol Strategies

Mailing Address 717 King Street
suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
02	21	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.21495

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

3000.00

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

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14020410244

**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 106 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. DonorBureau

Mailing Address 1900 N Culpeper St

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Statistical Modeling

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 01	DD 16	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

968.02

Transaction ID : SB17.21537

Full Name (Last, First, Middle Initial)

B. DonorBureau

Mailing Address 1900 N Culpeper St

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Statistical Modeling

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 02	DD 27	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

143.68

Transaction ID : SB17.21536

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1601 Willow Road

City State Zip Code
Menlo Park CA 94026

Purpose of Disbursement
Advertising Expenses

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 01	DD 03	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

473.34

Transaction ID : SB17.21490

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

968.02

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

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14020410245

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94026

Purpose of Disbursement
Advertising Expenses

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 05 / 2014

Amount of Each Disbursement this Period

454.76

Transaction ID : SB17.21489

B. Facebook

Mailing Address 1601 Willow Road

City Menlo Park State CA Zip Code 94026

Purpose of Disbursement
Advertising Expenses

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 07 / 2014

Amount of Each Disbursement this Period

1.90

Transaction ID : SB17.21400

C. First Virginia Community Bank

Mailing Address 11325 Random Hills Rd
Ste 240

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Bank fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

107.45

Transaction ID : SB17.21539

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

564.11

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

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14020410246

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. First Virginia Community Bank

Mailing Address 11325 Random Hills Rd
Ste 240

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
Bank fees

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Amount of Each Disbursement this Period

35.78

Transaction ID : SB17.21538

B. First Virginia Community Bank

Full Name (Last, First, Middle Initial)

Mailing Address 11325 Random Hills Rd
Ste 240

City State Zip Code
Fairfax VA 22030

Purpose of Disbursement
Bank fees

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2014

Amount of Each Disbursement this Period

34.12

Transaction ID : SB17.21548

c. FTIN Strategies

Full Name (Last, First, Middle Initial)

Mailing Address 325 East Jimmie Leeds Road
Suite 117

City State Zip Code
Galloway NY 08205-0000

Purpose of Disbursement
Campaign Management Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.21598

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

319.90

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

14020410247

**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 109 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. FTIN Strategies

Mailing Address 325 East Jimmie Leeds Road
Suite 117

City Galloway State NY Zip Code 08205-0000

Purpose of Disbursement
Campaign Management Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.21599

001
Category/
Type

B. FTIN Strategies

Mailing Address 325 East Jimmie Leeds Road
Suite 117

City Galloway State NY Zip Code 08205-0000

Purpose of Disbursement
Campaign Management Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 07 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.21600

001
Category/
Type

c. Glengary

Mailing Address 3303 East Baseline Road
Bld 4, Ste 207

City Gilbert State AZ Zip Code 85234

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1571.44

Transaction ID : SB17.21508

003
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2321.44

--

14020410248

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Glengary

Mailing Address 3303 East Baseline Road
Bld 4, Ste 207

City State Zip Code
Gilbert AZ 85234

Purpose of Disbursement
Replace Lost Checks

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 14 / 2014

Amount of Each Disbursement this Period

2507.99

Transaction ID : SB17.21510

Full Name (Last, First, Middle Initial)

B. Glengary

Mailing Address 3303 East Baseline Road
Bld 4, Ste 207

City State Zip Code
Gilbert AZ 85234

Purpose of Disbursement
List Rental & Maintenance

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 25 / 2014

Amount of Each Disbursement this Period

309.46

Transaction ID : SB17.21484

Full Name (Last, First, Middle Initial)

C. Global Payments

Mailing Address 10705 Red Run Blvd

City State Zip Code
Rockville MD 20855

Purpose of Disbursement
Credit Card fees

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

207.88

Transaction ID : SB17.21542

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

3025.33

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

14020410249

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Global Payments

Mailing Address 10705 Red Run Blvd

City State Zip Code
Rockville MD 20855

Purpose of Disbursement
Credit Card fees

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

80.24

Transaction ID : SB17.21541

Full Name (Last, First, Middle Initial)

B. Global Payments

Mailing Address 10705 Red Run Blvd

City State Zip Code
Rockville MD 20855

Purpose of Disbursement
Credit Card fees

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 25 / 2014

Amount of Each Disbursement this Period

74.10

Transaction ID : SB17.21543

Full Name (Last, First, Middle Initial)

C. Grounded in Grassroots

Mailing Address 1725 DeSales Street, NW
6th Floor

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Campaign Management Services

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 15 / 2014

Amount of Each Disbursement this Period

7146.00

Transaction ID : SB17.21516

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

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

7300.34

--

14020410250

**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 112 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Grounded in Grassroots

Mailing Address 1725 DeSales Street, NW
6th Floor

City Washington State DC Zip Code 20036

Purpose of Disbursement
Campaign Management Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2014

Amount of Each Disbursement this Period

5544.00

Transaction ID : SB17.21512

003
Category/
Type

B. Grow Your Campaign

Full Name (Last, First, Middle Initial)

Mailing Address Po Box 17253

City Arlington State VA Zip Code 22216-7253

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	01	2014

Amount of Each Disbursement this Period

31.13

Transaction ID : SB17.21609

003
Category/
Type

C. Grow Your Campaign

Full Name (Last, First, Middle Initial)

Mailing Address Po Box 17253

City Arlington State VA Zip Code 22216-7253

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	11	2014

Amount of Each Disbursement this Period

52.54

Transaction ID : SB17.21449

003
Category/
Type

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

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

5627.67

--

14020410251

**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 113 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Grow Your Campaign

Mailing Address Po Box 17253

City State Zip Code
Arlington VA 22216-7253

Purpose of Disbursement
Fees

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

100.19

Transaction ID : SB17.21462

Full Name (Last, First, Middle Initial)

B. Grow Your Campaign

Mailing Address Po Box 17253

City State Zip Code
Arlington VA 22216-7253

Purpose of Disbursement
List Rental & Maintenance

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 25 / 2014

Amount of Each Disbursement this Period

13.04

Transaction ID : SB17.21411

Full Name (Last, First, Middle Initial)

C. HSP Direct

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City State Zip Code
Herndon VA 20171

Purpose of Disbursement
Creative Fees

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB17.21545

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

2913.23

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

14020410252

**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 114 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. HSP Direct

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Creative Fees

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

1692.50

Transaction ID : SB17.21544

B. HSP Direct

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Creative Fees

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

6577.70

Transaction ID : SB17.21544

c. Image Direct

Mailing Address 200 Monroe Avenue
Building 4

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Printing and Mailshop

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

1064.43

Transaction ID : SB17.21547

SUBTOTAL of Disbursements This Page (optional)

9334.63

TOTAL This Period (last page this line number only)

14020410253

**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 115 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Kangaroo Express

Mailing Address 305 Gregson Drive

City Cary State NC Zip Code 27511

Purpose of Disbursement
gas (travel)

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

39.23

Transaction ID : SB17.21443

Full Name (Last, First, Middle Initial)

B. Kangaroo Express

Mailing Address 305 Gregson Drive

City Cary State NC Zip Code 27511

Purpose of Disbursement
gas (travel)

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 01 / 2014

Amount of Each Disbursement this Period

32.22

Transaction ID : SB17.21436

Full Name (Last, First, Middle Initial)

c. Kangaroo Express

Mailing Address 305 Gregson Drive

City Cary State NC Zip Code 27511

Purpose of Disbursement
gas (travel)

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 06 / 2014

Amount of Each Disbursement this Period

24.68

Transaction ID : SB17.21431

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

96.13

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

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14020410254

**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 116 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Kangaroo Express

Mailing Address 305 Gregson Drive

City Cary State NC Zip Code 27511

Purpose of Disbursement
Travel Expense

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Amount of Each Disbursement this Period

55.65

Transaction ID : SB17.21530

Full Name (Last, First, Middle Initial)

B. Braeden Kershner

Mailing Address 162 Seven Farms Drive
#305

City Charleston State SC Zip Code 29492

Purpose of Disbursement
In-kind - Office Space (owns Black Tie Music Academy LLC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 01 / 2014

Amount of Each Disbursement this Period

382.16

Transaction ID : SB17.21614

Full Name (Last, First, Middle Initial)

C. Braeden Kershner

Mailing Address 162 Seven Farms Drive
#305

City Charleston State SC Zip Code 29492

Purpose of Disbursement
In-kind - Office Space (owns Black Tie Music Academy LLC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 01 / 2014

Amount of Each Disbursement this Period

382.16

Transaction ID : SB17.21616

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

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

819.97

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14020410255

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Haley Kos

Mailing Address 1009 Crooked Stick Ct

City State Zip Code
Summerville SC 29483

Purpose of Disbursement
Intern

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21470

Full Name (Last, First, Middle Initial)

B. Haley Kos

Mailing Address 1009 Crooked Stick Ct

City State Zip Code
Summerville SC 29483

Purpose of Disbursement
Intern

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21472

Full Name (Last, First, Middle Initial)

c. Haley Kos

Mailing Address 1009 Crooked Stick Ct

City State Zip Code
Summerville SC 29483

Purpose of Disbursement
Intern

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21474

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

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

600.00

14020410256

**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 118 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Liberty Phone Center Inc

Mailing Address PO Box 8265

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Letter

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	24	2014

Amount of Each Disbursement this Period

1072.03

Transaction ID : SB17.21502

001
Category/
Type

B. Liberty Phone Center Inc

Mailing Address PO Box 8265

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Letter

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	12	2014

Amount of Each Disbursement this Period

1173.51

Transaction ID : SB17.21503

001
Category/
Type

C. NANCY MACE

Mailing Address 295 SEVEN FARMS DRIVE SUITE C-186

City CHARLESTON State SC Zip Code 29492

Purpose of Disbursement
In-kind - Office supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: SC District: 00

Date of Disbursement

M M	D D	Y Y Y Y
02	15	2014

Amount of Each Disbursement this Period

3.60

Transaction ID : SB17.21620

Category/
Type

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

2249.14

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

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14020410257

**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 119 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. NANCY MACE

Date of Disbursement

M M	D D	Y Y Y Y
03	03	2014

Mailing Address 295 SEVEN FARMS DRIVE SUITE C-186

Amount of Each Disbursement this Period

19.27

City State Zip Code
CHARLESTON SC 29492

Purpose of Disbursement
In-kind - Food and Beverage

Candidate Name

Category/
Type

Transaction ID : SB17.21618

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: SC District: 00

Full Name (Last, First, Middle Initial)

B. Mark it Red

Date of Disbursement

M M	D D	Y Y Y Y
01	13	2014

Mailing Address PO Box 217

Amount of Each Disbursement this Period

46000.00

City State Zip Code
Zionsville IN 46077

Purpose of Disbursement
Consulting/Polling

Candidate Name

Category/
Type

Transaction ID : SB17.21519

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Mark it Red

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2014

Mailing Address PO Box 217

Amount of Each Disbursement this Period

5000.00

City State Zip Code
Zionsville IN 46077

Purpose of Disbursement
Phone Append

Candidate Name

Category/
Type

Transaction ID : SB17.21511

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

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

51019.27

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

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14020410258

**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 120 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Mark it Red

Mailing Address PO Box 217

City Zionsville State IN Zip Code 46077

Purpose of Disbursement
Radio Ad Buy

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

9640.00

Transaction ID : SB17.21518

Full Name (Last, First, Middle Initial)

B. Mark it Red

Mailing Address PO Box 217

City Zionsville State IN Zip Code 46077

Purpose of Disbursement
Advertising Expenses

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

42084.00

Transaction ID : SB17.21518

Full Name (Last, First, Middle Initial)

c. Mark it Red

Mailing Address PO Box 217

City Zionsville State IN Zip Code 46077

Purpose of Disbursement
Phone Append

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

5720.00

Transaction ID : SB17.21513

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

57444.00

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

57444.00

14020410259

**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 121 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. MDI Imaging & Mail

Mailing Address 21955 Cascades Parkway

City Parkway State VA Zip Code 20166

Purpose of Disbursement
Printing and Mailshop

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

1355.31

Transaction ID : SB17.21549

Full Name (Last, First, Middle Initial)

B. Mallory Moore

Mailing Address MSC 2100 171 Moultrie Street

City Charleston State SC Zip Code 29409

Purpose of Disbursement
Intern

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 24 / 2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.21488

Full Name (Last, First, Middle Initial)

C. Mallory Moore

Mailing Address MSC 2100 171 Moultrie Street

City Charleston State SC Zip Code 29409

Purpose of Disbursement
Intern

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21473

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

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

1955.31

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14020410260

**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 122 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Mallory Moore

Mailing Address MSC 2100 171 Moultrie Street

City Charleston State SC Zip Code 29409

Purpose of Disbursement
Intern

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21475

B. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

3295.00

Transaction ID : SB17.21553

C. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

2471.88

Transaction ID : SB17.21552

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

5966.88

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

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14020410261

**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 123 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 30 / 2014

Amount of Each Disbursement this Period

627.89

Transaction ID : SB17.21550

B. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

1550.70

Transaction ID : SB17.21551

C. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 13 / 2014

Amount of Each Disbursement this Period

471.73

Transaction ID : SB17.21554

SUBTOTAL of Disbursements This Page (optional)

2650.32

TOTAL This Period (last page this line number only)

14020410262

**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 124 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Nova List

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

1599.79

Transaction ID : SB17.21555

003
Category/
Type

B. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 08 / 2014

Amount of Each Disbursement this Period

106.32

Transaction ID : SB17.21464

001
Category/
Type

c. Office Depot

Mailing Address 6600 N Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 19 / 2014

Amount of Each Disbursement this Period

62.43

Transaction ID : SB17.21454

001
Category/
Type

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

1768.54

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

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14020410263

**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 125 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. ONE NATION PAC

Mailing Address PO BOX 10144

City State Zip Code
PALM DESERT CA 92255

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2014

Amount of Each Disbursement this Period

4.54

Transaction ID : SB17.21401

Full Name (Last, First, Middle Initial)

B. Political Media Inc.

Mailing Address 406 First Street
3rd floor

City State Zip Code
Washington DC 20003

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2014

Amount of Each Disbursement this Period

49.90

Transaction ID : SB17.21603

Full Name (Last, First, Middle Initial)

c. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City State Zip Code
Herndon VA 20171

Purpose of Disbursement
Postage & Delivery

Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Amount of Each Disbursement this Period

797.82

Transaction ID : SB17.21558

SUBTOTAL of Disbursements This Page (optional)

852.26

TOTAL This Period (last page this line number only)

14020410264

**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 126 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Postage & Delivery

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

1479.58

Transaction ID : SB17.21559

B. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Service Fees - Postage

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	13	2014

Amount of Each Disbursement this Period

98.49

Transaction ID : SB17.21560

c. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Service Fees - Postage

003

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	13	2014

Amount of Each Disbursement this Period

6566.46

Transaction ID : SB17.21561

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

8144.53

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

8144.53

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14020410265

**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 127 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Service Fees - Postage

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 13 / 2014

Amount of Each Disbursement this Period

9.04

Transaction ID : SB17.21562

Full Name (Last, First, Middle Initial)

B. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Service Fees - Postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

7.47

Transaction ID : SB17.21562

Full Name (Last, First, Middle Initial)

C. Postage for Direct Mail Fundraising

Mailing Address 13755 Sunrise Valley Dr.
Ste 450

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Service Fees - Postage

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 20 / 2014

Amount of Each Disbursement this Period

497.99

Transaction ID : SB17.21564

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

514.50

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

514.50

14020410266

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

526.90

Transaction ID : SB17.21492

B. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2014

Amount of Each Disbursement this Period

6.00

Transaction ID : SB17.21402

c. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2014

Amount of Each Disbursement this Period

39.80

Transaction ID : SB17.21444

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

572.70

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

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14020410267

**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 129 OF 145

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

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

NAME OF COMMITTEE (In Full)
FRIENDS OF NANCY MACE

Full Name (Last, First, Middle Initial)

A. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 18 / 2014

Amount of Each Disbursement this Period

37.34

Transaction ID : SB17.21439

001

Category/
Type

B. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 27 / 2014

Amount of Each Disbursement this Period

9.04

Transaction ID : SB17.21403

001

Category/
Type

C. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 04 / 2014

Amount of Each Disbursement this Period

334.50

Transaction ID : SB17.21485

003

Category/
Type

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

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

380.88

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14020410268

**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 130 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	11	2014

Amount of Each Disbursement this Period

12.00

Transaction ID : SB17.21407

Full Name (Last, First, Middle Initial)

B. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	08	2014

Amount of Each Disbursement this Period

103.07

Transaction ID : SB17.21463

Full Name (Last, First, Middle Initial)

C. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	11	2014

Amount of Each Disbursement this Period

351.90

Transaction ID : SB17.21486

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

466.97

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

14020410269

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Qwik Pack & Ship

Mailing Address 295 Seven Farms Dr

City State Zip Code
Daniel Island SC 29492

Purpose of Disbursement
Shipping Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2014

Amount of Each Disbursement this Period

118.70

Transaction ID : SB17.21465

001
Category/
Type

B. Rickland Direct

Mailing Address 3405 COMMERCE ROAD

City State Zip Code
Richmond VA 23234

Purpose of Disbursement
Letter

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	22	2014

Amount of Each Disbursement this Period

1204.10

Transaction ID : SB17.21505

003
Category/
Type

C. Nathan Roberts

Mailing Address 14144 Dickens St
#223

City State Zip Code
Sherman Oaks CA 91423

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	09	2014

Amount of Each Disbursement this Period

375.60

Transaction ID : SB17.21487

003
Category/
Type

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

1698.40

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

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14020410270

**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 132 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Nathan Roberts

Mailing Address 14144 Dickens St
#223

City Sherman Oaks State CA Zip Code 91423

Purpose of Disbursement
Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2014

Amount of Each Disbursement this Period

297.00

Transaction ID : SB17.21483

Full Name (Last, First, Middle Initial)

B. Nathan Roberts

Mailing Address 14144 Dickens St
#223

City Sherman Oaks State CA Zip Code 91423

Purpose of Disbursement
Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.21509

Full Name (Last, First, Middle Initial)

c. RST Marketing

Mailing Address 1272 Corporate Park Dr

City Forest State VA Zip Code 24551

Purpose of Disbursement
Postage & Delivery

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	12	2014

Amount of Each Disbursement this Period

1548.33

Transaction ID : SB17.21566

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

3845.33

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

14020410271

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. SCM Enterprises

Mailing Address 2555 E. Tropicana Ave
Suite D

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

570.68

Transaction ID : SB17.21493

003
Category/
Type

B. SCM Enterprises

Full Name (Last, First, Middle Initial)

Mailing Address 2555 E. Tropicana Ave
Suite D

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 25 / 2014

Amount of Each Disbursement this Period

73.94

Transaction ID : SB17.21455

003
Category/
Type

C. SC TEA Party Coalition

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30985

City Charleston State SC Zip Code 29417

Purpose of Disbursement
Convention Admission

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 24 / 2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.21467

007
Category/
Type

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

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

794.62

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14020410272

**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 134 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Printing and Mailshop

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 01	D D D 16	Y Y Y Y Y Y Y 2014
-------------	-------------	-----------------------

Amount of Each Disbursement this Period

975.00

Transaction ID : SB17.21568

Full Name (Last, First, Middle Initial)

B. Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Printing and Mailshop

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 03	D D D 20	Y Y Y Y Y Y Y 2014
-------------	-------------	-----------------------

Amount of Each Disbursement this Period

1630.30

Transaction ID : SB17.21569

Full Name (Last, First, Middle Initial)

c. Sisk Mailing Service

Mailing Address 203 Log Canoe Circle

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Printing and Mailshop

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M 03	D D D 20	Y Y Y Y Y Y Y 2014
-------------	-------------	-----------------------

Amount of Each Disbursement this Period

6.68

Transaction ID : SB17.21570

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

2611.98

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

14020410273

**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 135 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Jared Smith

Mailing Address 1418 Hamlin Park Circle

City State Zip Code
Mt. Pleasant SC 29946

Purpose of Disbursement
staff

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.21507

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th Street

City State Zip Code
San Francisco CA 94110

Purpose of Disbursement
Merchant Processing Fees

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Amount of Each Disbursement this Period

1495.79

Transaction ID : SB17.21520

Full Name (Last, First, Middle Initial)

C. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City State Zip Code
Dulles VA 20166

Purpose of Disbursement
LR&M: Donor Data Reports

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.21571

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

3030.79

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

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14020410274

**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 136 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

105.00

Transaction ID : SB17.21572

Full Name (Last, First, Middle Initial)

B. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Maintenance

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Amount of Each Disbursement this Period

105.00

Transaction ID : SB17.21573

Full Name (Last, First, Middle Initial)

C. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 30 / 2014

Amount of Each Disbursement this Period

691.73

Transaction ID : SB17.21575

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

901.73

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

14020410275

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: Donor Data Reports

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

535.00

Transaction ID : SB17.21574

003
Category/
Type

B. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

745.00

Transaction ID : SB17.21576

003
Category/
Type

c. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

1450.66

Transaction ID : SB17.21577

003
Category/
Type

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

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

2730.66

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14020410276

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

Candidate Name

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.21578

B. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

Candidate Name

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

1185.00

Transaction ID : SB17.21579

C. Sunrise Data Services

Mailing Address 44845 Falcon Place
Ste 101-A

City Dulles State VA Zip Code 20166

Purpose of Disbursement
LR&M: List Rental

Candidate Name

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17.21580

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

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

1405.00

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14020410277

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 7250 Rivers Ave

City N Charleston State SC Zip Code 29406

Purpose of Disbursement
Campaign Supplies

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 05 / 2014

Amount of Each Disbursement this Period

211.67

Transaction ID : SB17.21477

B. The Rainmakers

Mailing Address 5211 Port Royal Road
Ste 500

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 08 / 2014

Amount of Each Disbursement this Period

6634.25

Transaction ID : SB17.21515

C. The Rainmakers

Mailing Address 5211 Port Royal Road
Ste 500

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 06 / 2014

Amount of Each Disbursement this Period

8111.68

Transaction ID : SB17.21517

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

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

14957.60

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14020410278

**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 140 OF 145

<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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. The Rainmakers

Mailing Address 5211 Port Royal Road
Ste 500

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

6613.89

Transaction ID : SB17.21514

Full Name (Last, First, Middle Initial)

B. Transaxt

Mailing Address 190 Monroe Avenue
Ste 500

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement
Merchant Processing Fees

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Amount of Each Disbursement this Period

285.99

Transaction ID : SB17.21521

Full Name (Last, First, Middle Initial)

C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Postage & Delivery

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 10 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.21587

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

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

7399.88

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14020410279

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Shipping Expense

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

42.41

Transaction ID : SB17.21584

Full Name (Last, First, Middle Initial)

B. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Gaging and Escrow

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 16 / 2014

Amount of Each Disbursement this Period

1960.66

Transaction ID : SB17.21589

Full Name (Last, First, Middle Initial)

C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Postage & Delivery

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 31 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21585

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

2203.07

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

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14020410280

**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 NANCY MAGE

Full Name (Last, First, Middle Initial)

A. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Postage & Delivery

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21586

Full Name (Last, First, Middle Initial)

B. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Shipping Expense

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Amount of Each Disbursement this Period

26.54

Transaction ID : SB17.21583

Full Name (Last, First, Middle Initial)

C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Caging and Escrow

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2014

Amount of Each Disbursement this Period

904.62

Transaction ID : SB17.21588

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

1131.16

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

14020410281

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Caging and Escrow

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.21590

Full Name (Last, First, Middle Initial)

B. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Caging and Escrow

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Amount of Each Disbursement this Period

746.59

Transaction ID : SB17.21591

Full Name (Last, First, Middle Initial)

C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Caging and Escrow

003
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Amount of Each Disbursement this Period

4.13

Transaction ID : SB17.21592

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

1000.72

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

14020410282

**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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement
Caging and Escrow

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 28 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.21593

003
Category/
Type

B. WESTERN REPRESENTATION PAC

Mailing Address 316 CALIFORNIA AVE SUITE 40

City RENO State NV Zip Code 89509

Purpose of Disbursement
List Rental & Maintenance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

224.56

Transaction ID : SB17.21479

003
Category/
Type

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Category/
Type

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

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

424.56

224959.71

14020410283

**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 145 OF 145

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" 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 NANCY MACE

Full Name (Last, First, Middle Initial)

A. Shan Whitfield

Mailing Address 16417 Paulina St

City Markham State IL Zip Code 60428

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B.
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

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

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

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

5200.00

Transaction ID : SB20A.21594

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

--

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

--

5200.00

5200.00

14020410284

INTERNATIONALLY,
 MS DECLARATION
 Y BE REQUIRED.

COPIES LEGIBLE.

U. S. SENATE
 TRACKING NUMBER
 13-068705

MAILED MAY 30 2014
 WASHINGTON POST OFFICE

U. S. POSTAGE
 PAID
 ALEXANDRIA, VA
 22314
 MAY 29 2014
 AMOUNT
 \$22.75
 0095374-16

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE () _____
 DB Capitol Strategies
 203 S. Union St
 Alexandria, VA 22314

PAYMENT BY ACCOUNT (if applicable)
 USPS Corporate Acct. No. _____ Federal Agency Acct. No. or "Postal Service" Acct. No. _____

DELIVERY OPTIONS (Customer Use Only)
 SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer:
 1) Specifies the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4)
 Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's
 mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
 Delivery Options:
 No Saturday Delivery (delivered next business day)
 Sunday/Holiday Delivery Required (additional fee, where available)
 10:30 AM Delivery Required (additional fee, where available)
 Refer to USPS.com or local Post Office for availability.

TO: (PLEASE PRINT) PHONE () _____
 Secretary of the Senate
 Office of Public Records
 332 Hart Senate Office Building
 Washington DC 20510
 ZIP + 4 (U.S. ADDRESSES ONLY)
 Screened by 24
 Senate Post Office

For pickup or USPS Tracking™, visit USPS.com
 \$100.00 Insurance Included. MAY 30 2014

UNITED STATES POSTAL SERVICE
 PRIORITY MAIL EXPRESS™
 EK 39654810 US

ORIGIN (POSTAL SERVICE USE ONLY)

PO Z/F Code	22313	Scheduled Delivery Date (MM/DD/YYYY)	5/30/14	Postage	\$ 20.05
Date Accepted (MM/DD/YYYY)	5-29-14	Scheduled Delivery Time	10:30 AM	Insurance Fee	\$
Time Accepted	5:33 PM	12:00 NOON		Return Receipt Fee	\$ 2.70
Weight	2.66 lb	1:30 AM Delivery Fee		Live Annual Transportation F	\$
Rate		Sunday/Holiday Premium Fee		Total Postage & Fees	\$ 22.75

DELIVERY (POSTAL SERVICE USE ONLY)
 Delivery Attempt (MM/DD/YYYY) Time Employee Signature
 Delivery Attempt (MM/DD/YYYY) Time Employee Signature
 Delivery Attempt (MM/DD/YYYY) Time Employee Signature
 LABEL TB3: JANUARY 2014 PSN 7690-02-000-8898 1-ORIGIN POST OFFICE COPY 582014020471

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HARRIS WATKINS OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-71
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 5/29/14 _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

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

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

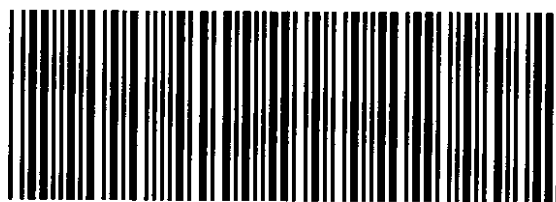
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 6-2-14

14020410286



SEN PATCH



SEN PATCH

14020410287