

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED FEC MAIL CENTER 2015 OCT 19 AM 8:57 Office Use Only

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

12FE4M5

FRIENDS OF SHAK HILL

ADDRESS (number and street)

PO BOX 486

Check if different than previously reported. (ACC)

CENTREVILLE VA 20122

2. FEC IDENTIFICATION NUMBER

C00546705

3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT VA 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 in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY 07 01 2015 09 30 2015

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

Type or Print Name of Treasurer Robin Hill

Signature of Treasurer Robin Hill

Date 10/15/2015

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

Table with 10 columns and 1 row, labeled 'Office Use Only'.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF SHAK HILL

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

	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))	1015.00	3527.76
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1015.00	3527.76
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	834.64	12167.72
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	58.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	834.64	12109.66
8. Cash on Hand at Close of Reporting Period (from Line 27)	5255.46	
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)	119727.60	

For further information contact:

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

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

WASHINGTON STATE DIVISION

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	834.64	12167.72
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.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	834.64	12367.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5075.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1015.00
25. SUBTOTAL (add Line 23 and Line 24).....	6090.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	834.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5255.46

**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 13
(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 SHAK HILL

A. Full Name (Last, First, Middle Initial)
Mary Behnke

Mailing Address **531 Stoneymead Drive**

City **Winchester** State **VA** Zip Code **22602**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 13 / 2015

Transaction ID : **SA11A1.6620**

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
Hans Doerr

Mailing Address **1605 Gayle Terrace**

City **Fredericksburg** State **VA** Zip Code **22401**

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

Name of Employer **Accelera Solutions, Inc.** Occupation **Virtualization Architect**

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2015

Transaction ID : **SA11A1.6645**

Amount of Each Receipt this Period
50.00

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 / 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).....

290.00

290.00

2015-09-10 10:01:00 AM

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

Transaction ID : **SC/10.4638**

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

[PERSONAL FUNDS]

Election: 2014

SHAK HILL

Primary

Mailing Address
PO BOX 486

General

Other (specify) ▼

City State ZIP Code
CENTREVILLE VA 20122

Original Amount of Loan 5000.00	Cumulative Payment To Date 200.00	Balance Outstanding at Close of This Period 4800.00
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TERMS

Date Incurred

Date Due

Interest Rate

Secured:

07 M

09 D

2013 Y

M M

D D

12/31/2014 Y

0.00 % (apr)

Yes

No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 4800.00

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

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

2014-08-08 10:10:10 AM

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

Transaction ID : **SC/10.4103**

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

[PERSONAL FUNDS]

Election: 2014

SHAK HILL

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 486

City State ZIP Code
CENTREVILLE VA 20122

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22915.00	0.00	22915.00

TERMS

Date Incurred: M 09 / D 18 / Y 2013
Date Due: M M / D D / Y 12/31/2014
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

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

22915.00

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

[]

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

2013-08-08 10:01:00 AM

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

Transaction ID : SC/10.4104

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

[PERSONAL FUNDS]

Election: 2014

SHAK HILL

Primary

General

Other (specify) ▼

Mailing Address
PO BOX 486

City State ZIP Code
CENTREVILLE VA 20122

Original Amount of Loan 22530.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 22530.00
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TERMS

Date Incurred MM / DD / YYYY 09 / 24 / 2013	Date Due MM / DD / YYYY 12/31/2014	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....	22530.00
TOTALS This Period (last page in this line only).....	[]

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

FURNISHED BY THE NATIONAL ARCHIVE

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

Transaction ID : **SC/10.4105**

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

[PERSONAL FUNDS]

Election: 2014

SHAK HILL

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 486

City State ZIP Code
CENTREVILLE VA 20122

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
17135.00	0.00	17135.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 30 / 2013	12/31/14	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	17135.00
TOTALS This Period (last page in this line only).....	104900.00

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

2013-10-10 10:00:00 AM

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robin Hill	Nature of Debt (Purpose): Non-Travel Advance
Mailing Address 6501 Flowerdew Hundred Court	
City State Zip Code Centreville VA 20120	

Outstanding Balance Beginning This Period 300.00	Transaction ID : SD10.4338
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 300.00
Payment This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHAK HILL	Nature of Debt (Purpose): Accrued Mileage to be reimbursed
Mailing Address PO BOX 486	
City State Zip Code CENTREVILLE VA 20122	

Outstanding Balance Beginning This Period 3628.30	Transaction ID : SD10.6241
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 3628.30
Payment This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHAK HILL	Nature of Debt (Purpose): Accrued Mileage to be reimbursed
Mailing Address PO BOX 486	
City State Zip Code CENTREVILLE VA 20122	

Outstanding Balance Beginning This Period 3633.10	Transaction ID : SD10.6242
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 3633.10
Payment This Period 0.00	

1) SUBTOTALS This Period This Page (optional)	7561.40
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

20030202 10:01:00 AM

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FRIENDS OF SHAK HILL

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHAK HILL	Nature of Debt (Purpose): Accrued Mileage to be reimbursed
Mailing Address PO BOX 486	
City CENTREVILLE State VA Zip Code 20122	

Outstanding Balance Beginning This Period 3643.90	Transaction ID : SD10.6243
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 3643.90
Payment This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SHAK HILL	Nature of Debt (Purpose): Accrued Mileage to be reimbursed
Mailing Address PO BOX 486	
City CENTREVILLE State VA Zip Code 20122	

Outstanding Balance Beginning This Period 3622.30	Transaction ID : SD10.6244
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 3622.30
Payment This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	
Amount Incurred This Period	Outstanding Balance at Close of This Period
Payment This Period	

1) SUBTOTALS This Period This Page (optional)	7266.20
2) TOTALS This Period (last page this line number only)	14827.60
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	104900.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	119727.60

2011-10-10 10:00:00 AM

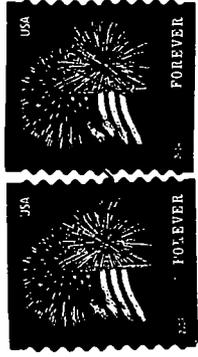
UNITED STATES POSTAL SERVICE

P.O. Box 486

Centreville, VA

20122

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999 E Street, NW
Washington DC 20463

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(3/2015)

10/19/15

DATE PREPARED

NOV 10 10 15 0000000000