

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ART ROBINSON FOR CONGRESS

ADDRESS (number and street)

2251 DICK GEORGE RD

Check if different
than previously
reported. (ACC)

CAVE JUNCTION

OR

97523

2. **FEC IDENTIFICATION NUMBER** ▼

C

C00481341

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

OR

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Noah Robinson

Signature of Treasurer

Noah Robinson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

15

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)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 34

Write or Type Committee Name

ART ROBINSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	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))....	67573.19	79932.83
(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))	67573.19	79932.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14915.25	60399.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	14915.25	60399.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	55637.64	
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)	42816.21	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 34

Write or Type Committee Name

ART ROBINSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

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).....

34306.00

36213.00

(ii) Unitemized.....

33267.19

39917.83

(iii) TOTAL of contributions from individuals ▶

67573.19

76130.83

(b) Political Party Committees.....

0.00

0.00

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

0.00

300.00

(d) The Candidate.....

0.00

3502.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

67573.19

79932.83

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

23443.46

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

23443.46

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

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

67573.19

103376.29

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 34

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14915.25	60399.52
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	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14915.25	60399.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2979.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67573.19
25. SUBTOTAL (add Line 23 and Line 24).....	70552.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14915.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	55637.64

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 34

☒ 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)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mary Adams

Mailing Address 1011 S. Butte Crest St.

City

State

Zip Code

Payson

AZ

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 14 2014

Transaction ID : SA11AI.36703

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Duane Alton

Mailing Address N 712 Lancashire Lane

City

State

Zip Code

Liberty Lake

WA

99019

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 07 2014

Transaction ID : SA11AI.36641

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Jim Beall

Mailing Address 100 Arrowhead Pass

City

State

Zip Code

Wimberley

TX

78676

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

M M / D D / Y Y Y Y
03 03 2014

Transaction ID : SA11AI.36516

Amount of Each Receipt this Period

250.00

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

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

1250.00

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 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Lloyd Benjamin

Mailing Address 71603 Rd. 383

City

Mc Cook

State

NE

Zip Code

69001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benjamin Dev. GroupOccupation
Civil Engineer

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
03		05		2014

Transaction ID : SA11AI.36526

Amount of Each Receipt this Period

200.00

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
SelfOccupation
Petroleum Engineer

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
03		25		2014

Transaction ID : SA11AI.36727

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

James Cecil Cantrell

Mailing Address 344 Milledge Cir.

City

Athens

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

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
02		24		2014

Transaction ID : SA11AI.36372

Amount of Each Receipt this Period

250.00

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

950.00

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

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 7 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sam Carpenter

Mailing Address 3069 NW Jewell Way

City

Bend

State

OR

Zip Code

97701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Centratel

Occupation
CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.36717

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Lynn Carta

Mailing Address 1710 Briggs Chaney Rd

City

Silver Spring

State

MD

Zip Code

20905

FEC ID number of contributing
federal political committee.

C

Name of Employer
USDA-ARS NL

Occupation
Research Biologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.36367

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Phil N Cornelius

Mailing Address 1056 Green Acres Rd.

City

Eugene

State

OR

Zip Code

97408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : SA11AI.36529

Amount of Each Receipt this Period

300.00

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

1100.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 8 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)

Garland D. Cox

Mailing Address 10459 E. Sonoran Vista Tr.

City State Zip Code
Tucson AZ 85749

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 07 2014

Transaction ID : SA11AI.36614

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Charles Crocker

Mailing Address One Post Street, Suite 2500

City State Zip Code
San Francisco CA 94104

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 07 2014

Transaction ID : SA11AI.36619

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

John Davis

Mailing Address P. O. Box 390

City State Zip Code
Akron NY 14001

FEC ID number of contributing
federal political committee.

C

Name of Employer
I Squared R Element Co., Inc.

Occupation
President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2014

Transaction ID : SA11AI.36143

Amount of Each Receipt this Period

2600.00

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

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

3600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Emmett Devereux

A.

Mailing Address PO Box 1607

City

Florence

State

OR

Zip Code

97439

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

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.36166

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Theodore P. Egan

B.

Mailing Address 87932 Longwood Ln.

City

Veneta

State

OR

Zip Code

97487

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 / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.36176

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Mary Egger

C.

Mailing Address 756 W Vista Hermosa Dr

City

Green Valley

State

AZ

Zip Code

85614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Farmer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.36276

Amount of Each Receipt this Period

300.00

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

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

850.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Terry Endress

Mailing Address 1821 Eagle Trace Dr

City

Greenwood

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
02 23 2014

Transaction ID : SA11AI.36357

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Robert J. Gilliland

Mailing Address PO Box 6367

City

Burbank

State

CA

Zip Code

91510

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

2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 06 2014

Transaction ID : SA11AI.36577

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mona Golobek

Mailing Address 70 Meade Street

City

Wellsboro

State

PA

Zip Code

16901

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 07 2014

Transaction ID : SA11AI.36597

Amount of Each Receipt this Period

500.00

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

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

1700.00

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 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Arthur A. Goodier

Mailing Address 290 Westminster Canterbury Dr.

Apt. 388

City

Winchester

State

VA

Zip Code

22603

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

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2014

Transaction ID : SA11AI.36484

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Edson P. Holland

Mailing Address 2965 Elk Canyon Circle

City

Sedalia

State

CO

Zip Code

80135

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

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.36506

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Madelyn Jackson

Mailing Address 94912 Hwy 42 S

City

Coquille

State

OR

Zip Code

97423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Figaro's

Occupation

Restaurant Owner

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
02		24		2014

Transaction ID : SA11AI.36422

Amount of Each Receipt this Period

600.00

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

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

1600.00

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 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Fred M. Kapetansky

Mailing Address 2599 Sonata Dr.

City

Columbus

State

OH

Zip Code

43209

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

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
03		06		2014

Transaction ID : SA11AI.36568

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

William M. Kazmann

Mailing Address 2438 Fairway Circle

City

Richardson

State

TX

Zip Code

75080

FEC ID number of contributing
federal political committee.

C

Name of Employer
LPC, Inc.Occupation
Engineer

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
02		26		2014

Transaction ID : SA11AI.36459

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Walter Kendall

Mailing Address 1211 Tyler St.

City

Glendale

State

CA

Zip Code

91205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.36125

Amount of Each Receipt this Period

2500.00

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

5400.00

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

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 13 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

David Keyston

Mailing Address P.O. Box 7066

City

Carmel

State

CA

Zip Code

93921

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
02 24 2014

Transaction ID : SA11AI.36406

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

David Keyston

Mailing Address P.O. Box 7066

City

Carmel

State

CA

Zip Code

93921

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

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11AI.36763

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Marion Kintner

Mailing Address 1202 Jacobs Drive #242

City

Eugene

State

OR

Zip Code

97402

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
02 22 2014

Transaction ID : SA11AI.36339

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

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 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Albert Masetti

Mailing Address 508 Beebe Rd.

City

Harrington

State

DE

Zip Code

19952

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

M M / D D / Y Y Y Y
01 20 2014

Transaction ID : SA11AI.36124

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Albert Masetti

Mailing Address 508 Beebe Rd.

City

Harrington

State

DE

Zip Code

19952

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

650.00

Date of Receipt

M M / D D / Y Y Y Y
02 22 2014

Transaction ID : SA11AI.36291

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Albert Masetti

Mailing Address 508 Beebe Rd.

City

Harrington

State

DE

Zip Code

19952

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

1050.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11AI.36762

Amount of Each Receipt this Period

400.00

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

1050.00

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

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 15 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Jonathan May

Mailing Address 7000 Lakepointe Drive

City

Oklahoma City

State

OK

Zip Code

73116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
02 28 2014

Transaction ID : SA11AI.36503

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dexter C. McDonald

Mailing Address 650 Oak Street

City

Bridgewater

State

MA

Zip Code

02324-1516

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

2000.00

Date of Receipt

M M / D D / Y Y Y Y
02 24 2014

Transaction ID : SA11AI.36360

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Rebekah Mercer

Mailing Address 240 Riverside Boulevard Apt. - 24A

City

New York

State

NY

Zip Code

10069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11AI.36761

Amount of Each Receipt this Period

2600.00

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

5100.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Foy Moody

Mailing Address 1920 Baldwin Blvd.

City

Corpus Christi

State

TX

Zip Code

78404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Veterinarian

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.36505

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Dr. Jane M Orient

Mailing Address 3615 E. Fifth St.

City

Tucson

State

AZ

Zip Code

85716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jane Orient Enterprises. Ltd.

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 22 / 2014

Transaction ID : SA11AI.36310

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Lynn A. Revak

Mailing Address 20 Bay Harbor Dr.

City

La Porte

State

TX

Zip Code

77571

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hoerbiger Service

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.36150

Amount of Each Receipt this Period

300.00

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

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

1800.00

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 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30522.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		15		2014

Transaction ID : SA11AI.36796

Amount of Each Receipt this Period

3570.00

In-kind - Produce and Distribute Newsletter

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30532.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.36783

Amount of Each Receipt this Period

10.00

In-kind - Office Space

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30537.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.36785

Amount of Each Receipt this Period

5.00

In-kind - Telephone Service

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

3585.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30538.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.36787

Amount of Each Receipt this Period

1.00

In-kind - Website

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30543.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.36789

Amount of Each Receipt this Period

5.00

In-kind - Telephone Service

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.**C** H0OR04073Name of Employer
Self-EmployedOccupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30548.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.36791

Amount of Each Receipt this Period

5.00

In-kind - Utilities

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

11.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

City

CAVE JUNCTION

State

OR

Zip Code

97523

FEC ID number of contributing
federal political committee.

C H0OR04073

Name of Employer
Self-Employed

Occupation
Chemist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

30558.46

Date of Receipt

03 / **31** / **2014**

Transaction ID : SA11AI.36794

Amount of Each Receipt this Period

10.00

In-kind - Equipment

Full Name (Last, First, Middle Initial)

Donna L Rook

Mailing Address 1432 W Altgeld

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

02 / **15** / **2014**

Transaction ID : SA11AI.36134

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jeffrey S Skinner

Mailing Address PO BOX 7007

City

Northridge

State

CA

Zip Code

91327

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRISM MANAGEMENT COMPANY

Occupation
ACTUARY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 / **08** / **2014**

Transaction ID : SA11AI.36649

Amount of Each Receipt this Period

500.00

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

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

760.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Eleanor St. Laurent

Mailing Address 5115 Dubois Dr

City

Vancouver

State

WA

Zip Code

98661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 20 / 2014

Transaction ID : SA11AI.36239

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Margaret C. Thomson

Mailing Address 221 Majestic Oak Cr.

City

Byron

State

GA

Zip Code

31008

FEC ID number of contributing
federal political committee.

C

Name of Employer
L. H. Thomson Co., Inc.

Occupation
CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.36373

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

George Vanleeuwen

Mailing Address 27070 Irish Bend Loop

City

Halsey

State

OR

Zip Code

97348

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self, State of Oregon

Occupation
Farming, Ex Legislator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.36159

Amount of Each Receipt this Period

300.00

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

2800.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 34

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

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Max R. Vordenbaum

Mailing Address 3508 Harrison Street

City

Wichita Falls

State

TX

Zip Code

76308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stephens Engineering

Occupation

Petroleum Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
02 28 2014

Transaction ID : SA11AI.36504

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Michael Walsh

Mailing Address 4710 Plummer Court

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Biotech Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 14 2014

Transaction ID : SA11AI.36705

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

1250.00

34306.00

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

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 735 Southwest 6th St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
Grants Pass	OR	97526

Amount of Each Disbursement this Period

39.00

Purpose of Disbursement
Bank Fees**Transaction ID : SB17.36766**

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Midwest Sign Screen

Mailing Address 16405 W. Lincoln Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

City	State	Zip Code
New Berlin	WI	53151

Amount of Each Disbursement this Period

1134.47

Purpose of Disbursement
Printing Supplies**Transaction ID : SB17.36779**

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Oregon Secretary of State - Elections Division

Mailing Address 255 Capitol St. NE, Ste 501

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2014

City	State	Zip Code
Salem	OR	97310

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Candidate Filing Fee**Transaction ID : SB17.36769**

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

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

3673.47

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

316.44

Purpose of Disbursement
Credit Card Processing FeesCategory/
Type

Transaction ID : SB17.36767

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

3570.00

Purpose of Disbursement
In-kind - Produce and Distribute NewsletterCategory/
Type

Transaction ID : SB17.36797

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 04

Full Name (Last, First, Middle Initial)

C. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Amount of Each Disbursement this Period

10.00

Purpose of Disbursement
In-kind - Office SpaceCategory/
Type

Transaction ID : SB17.36784

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 04

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

3896.44

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Telephone Service

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.36786

Candidate Name

Category/
Type

Office Sought:	☒ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

B. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Website

Amount of Each Disbursement this Period

1.00

Transaction ID : SB17.36788

Candidate Name

Category/
Type

Office Sought:	☒ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

C. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Telephone Service

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.36790

Candidate Name

Category/
Type

Office Sought:	☒ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
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State: OR District: 04

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

11.00

--

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Utilities

Amount of Each Disbursement this Period

1869.87

Transaction ID : SB17.36792

Candidate Name

Category/
Type

Office Sought:	☒ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

B. Dr. ART ROBINSON

Mailing Address 2251 DICK GEORGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
CAVE JUNCTION	OR	97523

Purpose of Disbursement
In-kind - Equipment

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.36795

Candidate Name

Category/
Type

Office Sought:	☒ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
----------------	--	--

State: OR District: 04

Full Name (Last, First, Middle Initial)

c. Screen USA

Mailing Address 5110 Tallview Dr.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

City	State	Zip Code
Rolling Meadows	IL	60008

Purpose of Disbursement
Printing Supplies

Amount of Each Disbursement this Period

1854.87

Transaction ID : SB17.36780

Candidate Name

Category/
Type

Office Sought:	☐ House ☐ Senate ☐ President	Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
----------------	---	--

State: District:

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

1869.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sylvester Management Corporation

Mailing Address P.O. Box 986

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

City	State	Zip Code
Irmo	SC	29063

Amount of Each Disbursement this Period

575.00

Purpose of Disbursement
ComplianceCategory/
Type**Transaction ID : SB17.36771**

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

City	State	Zip Code
Chicago	IL	60666

Amount of Each Disbursement this Period

225.50

Purpose of Disbursement
AirfareCategory/
Type**Transaction ID : SB17.36768**

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. United States Postal Service

Mailing Address 33096 Redwood Hwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
O'Brien	OR	97534

Amount of Each Disbursement this Period

3920.00

Purpose of Disbursement
Postal ServicesCategory/
Type**Transaction ID : SB17.36776**

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

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

4720.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 34

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Vonage

Mailing Address Web Service

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Eugene	OR	97404

Purpose of Disbursement
Phone Service

Amount of Each Disbursement this Period

90.93

Transaction ID : SB17.36765

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Westin Harbour Island

Mailing Address 725 S. Harbour Island Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
Tampa	FL	33602

Purpose of Disbursement
Lodging

Amount of Each Disbursement this Period

378.56

Transaction ID : SB17.36774

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify)	

State:

District:

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

469.49

14640.77

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 34

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.26130

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 25 / 2012

Date Due

M M / D D / Y Y Y Y
On Demand

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)..... ►

3000.00

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 34

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35793

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y
11 / 16 / 2012

Date Due

M M / D D / Y Y
On Demand

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)..... ►

2000.00

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 30 OF 34

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35848

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

15043.46

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15043.46

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 / 10 / 2012

Date Due

M M / D D / Y Y Y Y
None

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)..... ►

15043.46

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

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 34

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35849

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 30 / 2012

Date Due

M M / D D / Y Y Y Y

None

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)..... ►

2000.00

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 32 OF 34

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35940

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

M 03 / D 11 / Y 2013

Date Due

M M / D D / Y On Demand

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)..... ►

400.00

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.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 34

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.35989

ART ROBINSON FOR CONGRESS

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

Dr. ART ROBINSON

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

2251 DICK GEORGE ROAD

City

State

ZIP Code

CAVE JUNCTION

OR

97523

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
On Demand

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)..... ►

4000.00

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

26443.46

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 OF 34

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

ART ROBINSON FOR CONGRESS

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

Arent Fox

Nature of Debt (Purpose):

Legal and FEC Compliance Services

Mailing Address 1717 K Street NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

16372.75

Transaction ID : SD10.34354

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16372.75

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

16372.75

2) **TOTALS** This Period (last page this line number only)

16372.75

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

26443.46

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

42816.21