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Image# 201510149002861159

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An Autho	orized Committee	Office	Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5		
DORSEY NATIONAL F	UND				
	<u> </u>				
ADDRESS (number and street)	50 South Sixth Street				
Check if different than previously reported. (ACC)	Minneapolis		MN 554	02	
2. FEC IDENTIFICATION NU	MBER ▼ CITY	A	STATE ▲	ZIP CODE ▲	
C C00018945	3. IS 1	THIS NEW (N) OR	AMENDEI (A)	D	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2 X October 15 Quarterly Report (Q3 January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	Apr 20 (c) 12-Day PRE-Election Report for the: (d) 30-Day	O (M3) Jun 20 (M6) O (M4) Jul 20 (M7) Primary (12P) Convention (12C) On General (30G)	Aug 20 (M8 Sep 20 (M9 Oct 20 (M10 General (12G) Special (12S) Runoff (30R)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)	
5. Covering Period 07			/ D D / Y 30 2	2015	
I certify that I have examined this	·	ny knowledge and belief it is tr	rue, correct and comp	lete.	
Type or Print Name of Treasurer Lynnette S Crandall					
Signature of Treasurer Lynner	tte S Crandall	[Electronically Filed]		2015	
NOTE: Submission of false, errone	ous, or incomplete information r	may subject the person signing	this Report to the pena	ulties of 2 U.S.C. §437g.	
Office Use Only			FE	C FORM 3X Rev. 12/2004	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name DORSEY NATIONAL FUND 07 2015 09 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 24738.43 January 1, 2015 (b) Cash on Hand at 17058.43 Beginning of Reporting Period..... 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 17058.43 24738.43 6(a) and 6(c) for Column B)..... 4590.00 12270.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 12468.43 12468.43 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO

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



×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

DORSEY NATIONAL FUND

Report Covering the Period: From: 07 01 2015 To: 09 30 2015							
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
. Contributions (other than loans) From:	Total Tills I cilou	Galeridar Tear to Bate					
(a) Individuals/Persons Other							
Than Political Committees							
(i) Itemized (use Schedule A)	0.00	0.00					
	 						
(ii) Unitemized	0.00	0.00					
(iii) TOTAL (add							
Lines 11(a)(i) and (ii)▶	0.00	0.00					
	0.00	0.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees	0.00	0.00					
(such as PACs)(d) Total Contributions (add Lines		0.00					
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	0.00	0.00					
Transfers From Affiliated/Other		7					
Party Committees	0.00	0.00					
,		7 7					
. All Loans Received	0.00	0.00					
. Loan Repayments Received	0.00	0.00					
. Offsets To Operating Expenditures		7					
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
. Refunds of Contributions Made	7	7					
to Federal Candidates and Other							
Political Committees	0.00	0.00					
. Other Federal Receipts							
(Dividends, Interest, etc.)	0.00	0.00					
. Transfers from Non-Federal and Levin Funds	, , , , , , , , , , , , , , , , , , , ,						
(a) Non-Federal Account							
(from Schedule H3)	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00					
_							
. Total Federal Receipts	 						
(subtract Line 18(c) from Line 19)▶	0.00	0.00					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
Operating Expenditures: (a) Allocated Federal/Non-Federal	10.01 11101	Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(") No Folia I Olass	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	0.00	0.00		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Transfers to Affiliated/Other Party				
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	4500.00	6000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(300 00100010 1)		5.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To:				
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
The state of the s				
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
=				
Other Disbursements	90.00	6270.00		
Fodoral Floation Activity (2.11.5.C. \$421/20)				
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	7	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4590.00	12270.00		
_	7	7		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	4500.00	40070.00		
from Line 31)	4590.00	12270.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00		
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00		

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

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

_	R LINE			:	PAGE	6	OF	10
(ch	eck only	on	e)					
>	11a		11b		11c	12		
	13		14		15	16		17

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	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DORSEY NATIONAL FUND		
Full Name (Last, First, Middle Initial) Michael Ahern		Date of Receipt
Mailing Address 50 South Sixth Street		09 30 2015
City	State Zip Code	Transaction ID : SA11AI.8530
Minneapolis	MN 55402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	-
Dorsey & Whitney LLP	Lawyer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	[MEMO ITEM]
Full Name (Last, First, Middle Initial) Lynnette S Crandall Mailing Address 50 South Sixth Street		Date of Receipt
STE 1500		09 30 2015
City	State Zip Code	Transaction ID : SA11AI.8531
Minneapolis	MN 55402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	1
Dorsey & Whitney LLP	Lawyer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	[MEMO ITEM]
Full Name (Last, First, Middle Initial) Philippe Oman		Date of Receipt
Mailing Address 50 South Sixth Street		09 30 2015
City Minneapolis	State Zip Code MN 55402	Transaction ID : SA11AI.8532 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Dorsey & Whitney LLP	Accountant	
Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional).	· · · · · · · · · · · · · · · · · · ·	0.00
TOTAL This Period (last page this line numb	er only)	

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

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

	1 OIL LINE HOMBLIN					PAGE	7	OF		10
(check only one)										
	>	11a		11b		11c	12			
		13		14		15	16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee to			
NAME OF COMMITTEE (In Full) DORSEY NATIONAL FUND				
Full Name (Last, First, Middle Initial) A. Rose Wilson Mailing Address 50 South Sixth Street	Date of Receipt			
City	State Zip Code	09 30 2015 Transaction ID : SA11AI.8533		
Minneapolis	MN 55402	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation			
Dorsey & Whitney LLP	Administrator			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	[MEMO ITEM]		
Full Name (Last, First, Middle Initial)		Data of Receipt		
Mailing Address		Date of Receipt		
City	ity State Zip Code			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C			
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)	0.00		
TOTAL This Period (last page this line num	ber only)	0.00		

S	CHEDULE B (FEC Form 3X)			FOR LINE	OR LINE NUMBER: PAGE 8 OF 10			
ΙΤ	EMIZED DISBURSEMENTS	Use separate sche		(check only	one)			
•		for each category Detailed Summary		21b	22 🗶 23			
_		,		27	28a 28	b 28c 29 30b		
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam							
01	NAME OF COMMITTEE (In Full)	le and address of ar	iy political	committee to	Solicit Contribution	ons from such committee.		
$ \rangle$	DORSEY NATIONAL FUND							
/	DORSET NATIONAL FUND							
	Full Name (Last, First, Middle Initial)							
Α.	DEMOCRATIC SENATORIAL CAN	E	Date of Disbu	rsement				
	Moiling Address 400 MARX/ AND AVENUE NE				M M / E			
	Mailing Address 120 MARYLAND AVENUE NE				08	17 2015		
	City	State Zip Cod	de		T	ID 0000 0540		
	WASHINGTON	DC 20002			Transaction	ID : SB23.8518		
	Purpose of Disbursement Political Contribution		l I	011	A	ah Diahamaanant thia Daviad		
	Candidate Name		[.	011	Amount of Ea	ch Disbursement this Period		
	Carradate Name			Category/ Type		1000.00		
	Office Sought: House Disbursen	nent For:		.,,,,,	,	,		
	Senate	Primary Ge	eneral					
	President	Other (specify) ▼						
_	State: District:							
В.	Full Name (Last, First, Middle Initial) DONNELLY FOR INDIANA				Date of Disbu	rsament		
٥.	DONNELLY FOR INDIANA			M M / I				
	Mailing Address 1050 17TH ST NW STE 590				08	17 2015		
	•	State Zip Coo DC 20036	de		Transaction	ID : SB23.8524		
	WASHINGTON Purpose of Disbursement	DC 20036						
	Political Contribution			011	Amount of Ea	ch Disbursement this Period		
	Candidate Name			Category/		500.00		
	JOSEPH S DONNELLY			Туре		500.00		
		nent For: 2018						
		,	eneral					
	State: IN District: 00	Other (specify) ▼						
_	Full Name (Last, First, Middle Initial)							
C.	FRIENDS OF PAT TOOMEY				Date of Disbu	rsement		
					M M / E) D / Y Y Y Y		
	Mailing Address 228 S. WASHINGTON ST., SUITE	. WASHINGTON ST., SUITE 115			08	11 2015		
	City S	State Zip Cod	10					
	-	VA 22314	u c		Transaction	ID: SB23.8519		
	Purpose of Disbursement							
	Political Contribution			011	Amount of Ea	ch Disbursement this Period		
	Candidate Name			Category/		500.00		
	PATRICK JOSEPH TOOMEY Office Sought: House Disbursen	nent For: 2016		Туре	7	000.00		
			eneral					
	President	Other (specify) ▼	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
_	State: PA District: 00							
Г								
s	UBTOTAL of Disbursements This Page (optional)					2000.00		
_	OTAL This David (last up a this line and the							
1 1	OTAL This Period (last page this line number only)				1			

SCHEDULE B (FEC Form 3X)	Llos concrete celestris(-)	FOR LINE		PAGE 9 OF 10	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	I ' — '	(check only one) 21b 22 X 23 24		
	Detailed Summary Page	21b 27		23 24 25 26 28b 28c 29 30	
Any information copied from such Reports and Statem					
or for commercial purposes, other than using the name	e and address of any politic	al committee to	solicit contribu	tions from such committee.	
DORSEY NATIONAL FUND					
Full Name (Last, First, Middle Initial)					
A. SHELBY FOR U S SENATE	Date of Disb				
Mailing Address PO BOX 1091		09	01 2015		
City S TUSCALOOSA		Transactio	n ID : SB23.8527		
Purpose of Disbursement	AL 35403				
Politcal Contribution		011	Amount of E	ach Disbursement this Period	
Candidate Name RICHARD C SHELBY		Category/ Type		2500.00	
	nent For: 2020	туре	,	7	
	Primary General				
State: AL District: 00	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B.			Date of Disb	pursement	
Matter Address		M = M /	D D / Y Y Y Y Y		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
			Amount of E	ach Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disbursem	nent For:	1900	,	, , , , , , , , , , , , , , , , , , , ,	
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C.			Date of Disb	pursement	
Mailing Address	Mailing Address				
	7: 0				
City	State Zip Code				
Purpose of Disbursement					
Candidate Name			Amount of E	ach Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disbursen		,,	,		
	Primary General Other (specify) ▼				
State: District:	Other (specify)				
SUBTOTAL of Disbursements This Page (optional)		·····•		2500.00	
TOTAL This Period (last page this line number only)				4500.00	
TOTAL This Period (last page this line number only).					

City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Office Sought: House Primary General Office Sought: House Primary General Office Sought: Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27				
Full Name (Last, First, Middle Initial) A. Dorsey & Whitney LLP Mailing Address 50 South Sixth Street City City State Zip Code MN 55402 Transaction ID : \$829.8517 Amount of Each Disbursement this Period Category/ Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Furpose of Disbursement Candidate Name Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Full Name (Last, First, Middle Initial) Category/ Office Sought: Senate President Category/ Office Sought: Senate President Category/ Office Sought: Senate President Other (specify) Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Other (specify) Amount of Each Disbursement this Period Category/ Type Other (specify)	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ements may not be sold or use ame and address of any politica	d by any personal committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
A Dorsey & Whitney LLP Mailing Address 50 South Sixth Street City State Zip Code MNN 55402 Purpose of Disbursement Administrative/Overhead Expenses Candidate Name Office Sought: House President Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Category/ Office Sought: House Disbursement For: Senate President Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) State Zip Code Purpose of Disbursement This Period Category/ Type Office Sought: House President Other (specify) State Zip Code Purpose of Disbursement This Period Category/ Type Office Sought: House President Other (specify) State Zip Code Purpose of Disbursement This Period Category/ Type Office Sought: House President Other (specify) Senate President Other (specify) Subtotal of Disbursement This Page (optional) Subtotal							
Mailing Address 50 South Sixth Street	,	· · · · · · · · · · · · · · · · · · ·					
Minneapolis				M M / D D / Y Y Y Y			
Administrative/Overhead Expenses Candidate Name Office Sought:	Minneapolis			Transaction ID : SB29.8517			
Office Sought: House Senate President State: District: Senate President State: District: Senate President State: District: Senate President State: District: State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: District: District: Senate President State: District: Senate President State: Disbursement For: Senate President State: Disbursement This Page (optional)	Administrative/Overhead Expenses			Amount of Each Disbursement this Period			
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: House State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Other (specify) ▼ Suppose of Disbursement this Period Category/ Type Office Sought: House President Other (specify) ▼ Suppose of Disbursement This Page (optional)				90.00			
B. Date of Disbursement	Senate President	Primary General					
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substrate: District: Substrate: District: Substrate: District: Primary General Other (specify) ▼ Substrate: District:							
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Type Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Type City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: Senate Primary General Other (specify) President Other (specify) Primary General Other (specify) President State: District:	В.						
Purpose of Disbursement Candidate Name Category/ Office Sought: House	Mailing Address	Mailing Address					
Candidate Name Category/ Type	City	State Zip Code					
Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C: Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type State: District: Substate: District: 990.00	·			Amount of Each Disbursement this Period			
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substrate Disbursements This Page (optional)	Candidate Name						
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substoctable Initial) Date of Disbursement Amount of Each Disbursement this Period Primary General Other (specify) 90.00	Senate President	Primary General					
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: SUBTOTAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)			Date of Dishursement			
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substitute This Page (optional)							
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Subtotal of Disbursements This Page (optional)		State Zip Code					
Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	•						
State: District: Primary General Other (specify) State: District: 90.00	Candidate Name			Amount of Each Disbursement this Period			
SOBTOTAL OF DISDUISEMENTS THIS Page (Optional)	Senate President	Primary General					
SOBTOTAL OF DISDUISEMENTS THIS Page (Optional)			_	90.00			
				90.00			