PAGE 1 / 8

Image# 14960756162

**FEC** FORM 3Y

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

TORIW 3X	For Other Than An	Authorized (	Committe	ee		Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ple: If typin he lines.	g, type	12FE4M5		
Conservative Leaders	hip Fund						
ADDRESS (number and street)	22780 Indian Creek Dri	ve, Ste 100					
Check if different than previously reported. (ACC)	Dulles				VA	20166	-
2. FEC IDENTIFICATION N	UMBER ▼	CITY 🛦		S	STATE 🛦	ZIP CO	DE 🛦
C C00388223		B. IS THIS REPORT	× (r	EW N) <b>OR</b>	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5)	-	20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (  July 15 Quarterly Report (	(C) 12-Day		rimary (12P)	ul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE) Runoff (12R)
October 15 Quarterly Report (i	Report for the	ne: C	onvention (1	2C)	Special (	12S) in the	
Year-End Report (*)  July 31 Mid-Year Report (Non-electic	(d) 30-Day	lection on				State of	
Year Only) (MY)  Termination Report (TER)	POST-Election Report for the		eneral (30G	)	Runoff (3	0R) in the	Special (30S)
(ILN)	E	lection on				State o	of
5. Covering Period 0		014	through	03	31/	2014	
I certify that I have examined the	his Report and to the be	st of my knowle	edge and b	elief it is true	e, correct and	l complete.	
Type or Print Name of Treasure	er Cheryl L. Freauff						
Signature of Treasurer Che.	ryl L. Freauff	[E	Electronically	Filed] Da	ate 04	15 /	2014
NOTE: Submission of false, error	neous, or incomplete inform	nation may subj	ect the pers	on signing thi	is Report to th	e penalties of 2	U.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/2	

FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name  Conservative Leadership Fund		
Report Covering the Period: From: 01	01 2014 To:	03 31 2014
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		20522.97
(b) Cash on Hand at Beginning of Reporting Period	20522.97	
(c) Total Receipts (from Line 19)	1000.00	1000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21522.97	21522.97
7. Total Disbursements (from Line 31)	1269.82	1269.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20253.15	20253.15
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
X This committee has qualified as a multicand	didate committee. (see FEC FORM 1M)	
Fe	or 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

Conservative	Leadership	Fund
	Loudordinp	i aiia

Report Covering the Period: From: 01 01 2014 To: 03 31 2014						
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Contributions (other than loans) From:						
(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				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees (such as PACs)	1000.00	1000.00				
(d) Total Contributions (add Lines						
11(a)(iii), (b), and (c)) (Carry	1000.00	1000.00				
Totals to Line 33, page 5)  Transfers From Affiliated/Other	1000.00	1000.00				
Party Committees	0.00	0.00				
,						
3. All Loans Received	0.00	0.00				
Loop Pengyments Pageived	0.00	0.00				
. Loan Repayments Received	0.00	0.00				
(Refunds, Rebates, etc.)						
(Carry Totals to Line 37, page 5)	0.00	0.00				
6. Refunds of Contributions Made	,					
to Federal Candidates and Other	0.00	0.00				
Political Committees	0.00	0.00				
(Dividends, Interest, etc.)	0.00	0.00				
B. Transfers from Non-Federal and Levin Funds						
(a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
	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				
7. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	1000.00	1000.00				
. Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	1000.00	1000.00				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Operating Expenditures: —	iotai iiiis Fellou	Calellual Teal-10-Date	
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	269.82	269.82	
Expenditures	209.02	209.02	
(add 21(a)(i), (a)(ii), and (b))▶	269.82	269.82	
Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Contributions to Federal Candidates/Committees			
and Other Political Committees	1000.00	1000.00	
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	
(use scriedule 1)		0.00	
Loan Repayments Made	0.00	0.00	
4,19			
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	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)	0.00		
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
_			
Other Disbursements	0.00	0.00	
_	, , , , , , , , , , , , , , , , , , , ,		
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6) (i) Federal Share	0.00	0.00	
(i) Federal Strate			
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely			
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	
Total Disbursements (add Lines 21(c), 22,	100000		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1269.82	1269.82	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	1269.82	1269.82	
	7		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1000.00	1000.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1000.00	1000.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	269.82	269.82	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
3. Net Operating Expenditures (subtract Line 37 from Line 36)	269.82	269.82	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		FOR LINE NUMBER: PAGE 6 OF 8 (check only one)
		erson for the purpose of soliciting contributions
d		
Occupation		Date of Receipt  02 25 2014  Transaction ID : SA11C.4533  Amount of Each Receipt this Period  1000.00
		Date of Receipt  Amount of Each Receipt this Period
		Date of Receipt  Amount of Each Receipt this Period
	State TN C Con Occupation Aggregate  State C Occupation Aggregate  State C Occupation  Aggregate  C Occupation  C C C C C C C C C C C C C C C C C C	State Zip Code  Compation  State Zip Code  TN 37830  C C00546234  Occupation  Aggregate Year-to-Date ▼  State Zip Code  C Coccupation  State Zip Code  TN 37830  C Tournel To

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

1000.00

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 7 OF 8			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	X 21b	22 23	24 25 26	
	, ,	27	28a 28b	28c 29 30	
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Conservative Leadership Fund					
Full Name (Last, First, Middle Initial)					
Election Compliance Services	Date of Disbursen				
Mailing Address 22780 Indian Creek Drive Ste. 100			02 28	_2014	
•	State Zip Code		Transaction ID :	SR21R 4530	
Dulles	VA 20166		mansaction ib .	3D21D. <del>4</del> 330	
Purpose of Disbursement reporting service			Amount of Each [	Disbursement this Period	
Candidate Name		Category/ Type		269.82	
Office Sought: House Disburser	nent For:			,	
	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			Data of Dishamor	aant	
			Date of Disbursen		
Mailing Address			M = M / D = I	/ / / / / / / / / / / / / / / / / / / /	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
r alpece of Biobalcomone			Amount of Each [	Disbursement this Period	
Candidate Name		Category/			
		Type			
Office Sought: House Disbursen	nent For:				
Senate	Primary General				
President	Other (specify) ▼				
State: District:  Full Name (Last, First, Middle Initial)					
ruii Name (Last, First, Middle Initial)			Date of Disbursen	nent	
			M M / D I	) / Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Candidate Name		Category/ Type	Amount of Each I	Disbursement this Period	
Office Sought: House Disburser	nent For:			7	
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)}$				269.82	
				200.00	
TOTAL This Period (last page this line number only)				269.82	

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TEMIZED DISBURSEMENTS  Use separate schedule(s) (check only one)	SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 OF 8			
Detailed Summary Page	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
try information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committees.  NAME OF COMMITTEE (in Full)  Conservative Leadership Fund  Full Name (Last, First, Middle Initial)  Conservative Leadership Fund  Full Name (Last, First, Middle Initial)  Condidate Name  Category/ Purpose of Disbursement  Purpose of Disbursement  Candidate Name  Category/ Purpose of Disbursement  Category/ Purpose of Disbursement  Candidate Name  Category/ Purpose of Disbursement  Category/ Purpose of Disbursement  Candidate Name  Category/ Purpose of Disbursement  Category/ Purpose of Disbursement  Category/ Purpose of Disbursement  Candidate Name  Category/ Purpose of Disbursement  Category/ Pu						
Amount of Each Disbursement  Cardidate Name	Any information copied from such Poporte and States	nents may not be sold or us				
Full Name (Last, First, Middle Initial)  Amount of Each Disbursement  Candidate Name  Cardidate Name  Cardida						
Full Name (Last, First, Middle Initial)  REPUBLICAN PARTY OF VIRGINIA INC  Mailing Address 115 EAST GRACE STREET  City State Zip Code VA 23219  Purpose of Disbursement Political contribution  Candidate Name  Office Sought: House Period Other (specify) ▼  State: District  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement this Period  Amount of Each Disbursement this Period Category/ Type  Date of Disbursement this Period Category/ Type  Office Sought: House Senate Primary General Primary General Primary General Other (specify) ▼  Date of Disbursement this Period Category/ Type  Date of Disbursement Type  Office Sought: House Senate Primary General Other (specify) ▼  State: Disbursement For: General Primary General Other (specify) ▼  Date of Disbursement this Period Category/ Type  Date of Disbursement Type  Date of Disbursement Type  Amount of Each Disbursement Type  Amount of Each Disbursement Type  Date of Disbursement Type  Dat	NAME OF COMMITTEE (In Full)					
Date of Disbursement  Office Sought: House State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Purpose of Disbursement  Candidate Name  Category¹  Office Sought: House Primary General Purpose of Disbursement  Candidate Name  Category¹  Office Sought: House Primary General Purpose of Disbursement  Candidate Name  Category¹  Office Sought: House Primary General Purpose of Disbursement  Candidate Name  Category¹  Office Sought: House Senate Primary General President  Other (specify) ▼  Date of Disbursement this Period  Category¹  State: District  Full Name (Last, First, Middle Initial)  Date of Disbursement  Amount of Each Disbursement this Period  Category¹  State: District  Full Name (Last, First, Middle Initial)  Date of Disbursement  Amount of Each Disbursement this Period  Category¹  Type  Office Sought: House Primary General Category¹  Office Sought: House Primary General Category¹  Office Sought: House Primary General Category¹  Date of Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement	Conservative Leadership Fund					
Mailing Address 115 EAST GRACE STREET  City State Zip Code VA 23219  Purpose of Disbursement Political contribution  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Other (specify) ▼  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Disbursement this Period  Category/ Type  Date of Disbursement this Period  Categor	Full Name (Last, First, Middle Initial)					
Mailing Address 115 EAST GRACE STREET	A. REPUBLICAN PARTY OF VIRGIN	IA INC				
RICHMOND Purpose of Disbursement Political contribution Candidate Name Category/ Type  District: Full Name (Last, First, Middle Initial) Candidate Name  City Purpose of Disbursement Category/ Type  District: Full Name (Last, First, Middle Initial) Candidate Name  City State: District: Full Name Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Date of Disbursement this Period  Category/ Type  District: Full Name (Last, First, Middle Initial) Candidate Name  City Senate President City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) Category/ Type  Amount of Each Disbursement (Initial) Amount of Each Disbursement (Initial) Category/ Type  District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) Category/ Type  Amount of Each Disbursement (Initial) Category/ Type  Amount of Each Disbursement (Initial) Category/ Type  Category/ Type  Category/ Type  Category/ Type  Amount of Each Disbursement (Initial)	Mailing Address 115 EAST GRACE STREET					
RICHMOND  VA 23219  Purpose of Disbursement Political contribution  Candidate Name  Category/ Type  Disbursement For: 2014 Senate President State: District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Disbursement  Candidate Name  Category/ Type  Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  District:  Category/ Type  Date of Disbursement  Category/ Type  District:  District:  Category/ Type  District:  District	-			Transaction ID	) · SB23 4529	
Political contribution  Candidate Name  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  District:  Full Name (Last, First, Middle Initial)  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  District:  Date of Disbursement  Category/ Type  District:  Date of Disbursement  Category/ Type  District:  Date of Disbursement  Date of Disbur		VA 23219		i i alisaction ID	, . JDZJ. <del>4</del> JZ0	
Office Sought: House Sonate President State: District: St	•			Amount of Each	Disbursement this Period	
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailling Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House President Primary General Primary  State: District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Type  Office Sought: President Other (specify)   Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: Primary General Primary General Primary General President Other (specify)   State: District:  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate President Other (specify)   Site Disbursement For: General Primary Gene	Candidate Name				1000.00	
Senate President Other (specify)   State: Distric:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Type  Office Sought: District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For:  Category/ Type  Office Sought: House Disbursement For:  Candidate Name  Other (specify)   Other (specify)   Date of Disbursement  Amount of Each Disbursement  Amount of Each Disbursement this Period  Other (specify)   Other (specify)   Type  Other (specify)   Other (specify)   Type  Other (specify)   Type  Topos of Disbursement this Period  Other (specify)   Type  Other (specify)   Type  T	Office Sought: House Disburson	nent For: 2014	Туре		.300.00	
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)   ▼  State: District:  Full Name (Last, First, Middle Initial)  State: District:   Date of Disbursement this Period  Amount of Each Disbursement this Period  Date of Disbursement this Period  Category/ Type  Office Sought:   House   Primary   General   Other (specify)   ▼  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name   Category/ Type  Office Sought:   House   Disbursement For:   Category/ Type  Office Sought:   House   Disbursement For:   Primary   General   Category/ Type  Office Sought:   House   Disbursement For:   Primary   General   President   Disbursement This Period   Disbursement Th						
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement For: General Other (specify)   Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: General Other (specify)   Category/ Type  Office Sought: House Disbursement For: General Other (specify)   Senate President Other (specify)   State: District: 1000.00	President	,				
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Balling Address  City State Zip Code  President Other (specify) ▼  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Subtrotal of Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)						
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General  City State Zip Code  Purpose of Disbursement this Period  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement  Category/ Type  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate President Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)				Data of Bill		
City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substrotal of Disbursement For: Senate President Other (specify) ▼  Substrotal of Disbursements This Page (optional)	·					
City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President Disbursement For: Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)	Mailing Address			M M / D	D / Y Y Y Y	
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement  Date of Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Substitute District:  Substitute Disbursements This Page (optional)						
Candidate Name    Category/ Type	City	State Zip Code				
Candidate Name    Category/ Type	Purpose of Disbursement					
Office Sought: House Senate Primary General Other (specify)   State: District: District: Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) Type  State: District: District: District: Disbursements This Page (optional)				Amount of Each	Disbursement this Period	
Office Sought: House 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 Senate Primary General Other (specify)   Office Sought: House Other (specify)   State: District:  Substate: District: District:   Substate: District: District:   Substate: Disbursements This Page (optional)	Candidate Name					
State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Pirmary General Other (specify)   Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: President Other (specify)   State: District:  Substate: District: 1000.00	Office Sought: House Bishman	aant Far	Туре			
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