

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00563858

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day **POST-Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 Keith A. Davis

Signature of Treasurer Keith A. Davis [Electronically Filed] Date / /

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FOUNDERS SENATE CANDIDATE COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="261600.00"/>	<input type="text" value="261600.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="261600.00"/>	<input type="text" value="261600.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="195915.37"/>	<input type="text" value="195915.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65684.63"/>	<input type="text" value="65684.63"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

Write or Type Committee Name

FOUNDERS SENATE CANDIDATE COMMITTEE

Report Covering the Period: From: 04 / 01 / 2014 To: 06 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	261600.00	261600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	261600.00	261600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	261600.00	261600.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. 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
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	261600.00	261600.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	261600.00	261600.00

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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6915.35	6915.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6915.35	6915.35
22. Transfers to Affiliated/Other Party Committees.....	189000.02	189000.02
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. 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 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	195915.37	195915.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	195915.37	195915.37

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	261600.00	261600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	261600.00	261600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6915.35	6915.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6915.35	6915.35

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(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 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)
FOUNDERS SENATE CANDIDATE COMMITTEE

A. Geoffrey T. Boisi
 Full Name (Last, First, Middle Initial)
 Mailing Address 86 Piping Rock Road
 City State Zip Code
 Locust Valley NY 11560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Roundtable Investment Partners Investment banker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 23700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014
Transaction ID : SA11AI.4159
 Amount of Each Receipt this Period
 23700.00

B. James K. Dobbs III
 Full Name (Last, First, Middle Initial)
 Mailing Address 356 Worth Avenue
 City State Zip Code
 Palm Beach FL 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dobbs Brothers Management Svc. Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 30000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4154
 Amount of Each Receipt this Period
 30000.00

C. Lisa D. Dobbs III
 Full Name (Last, First, Middle Initial)
 Mailing Address 356 Worth Avenue
 City State Zip Code
 Palm Beach FL 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 30000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4153
 Amount of Each Receipt this Period
 30000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 83700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

A. Calvert S. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 812 Park Avenue
#11-D

City New York State NY Zip Code 10021

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23700.00

Date of Receipt
06 / 03 / 2014
Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
23700.00

B. George B. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 812 Park Avenue
#11-D

City New York State NY Zip Code 10021

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

Name of Employer Quilvest Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23700.00

Date of Receipt
06 / 03 / 2014
Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
23700.00

C. Herbert N. Morgan
Full Name (Last, First, Middle Initial)

Mailing Address 3450 N. Venice Street

City Arlington State VA Zip Code 22207

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt
06 / 24 / 2014
Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
12000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 59400.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

A. Nersi Nazari
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 Bellbrook Way
 City Atherton State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vital Connect, Inc. Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 23700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2014
Transaction ID : SA11AI.4161
 Amount of Each Receipt this Period
 23700.00

B. Bob Sasser
 Full Name (Last, First, Middle Initial)
 Mailing Address 4157 Cheswick Lane
 City Virginia Beach State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dollar Tree Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 23700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2014
Transaction ID : SA11AI.4163
 Amount of Each Receipt this Period
 23700.00

C. Mary Jordan Saunders
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Park Avenue #2-C
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 23700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4149
 Amount of Each Receipt this Period
 23700.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 71100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

A. Thomas A. Saunders III
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Park Avenue #2-C
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Investor
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4146
 Amount of Each Receipt this Period
 23700.00
 Aggregate Year-to-Date ▼
 23700.00

B. Thomas A. Saunders IV
 Full Name (Last, First, Middle Initial)
 Mailing Address 2346 Astral Drive
 City Los Angeles State CA Zip Code 90046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Palter Deliso Occupation Creative director
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4157
 Amount of Each Receipt this Period
 23700.00
 Aggregate Year-to-Date ▼
 23700.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	47400.00
TOTAL This Period (last page this line number only).....▶	261600.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

5	1	5	8	.	6	5
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Full Name (Last, First, Middle Initial)

B. Thomas A. Saunders III

Mailing Address 812 Park Avenue #2-C

City New York State NY Zip Code 10021

Purpose of Disbursement
jfc catering/facility rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

1	7	4	2	.	9	2
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. The Links Club

Mailing Address 36 East 62nd Street

City New York State NY Zip Code 10054

Purpose of Disbursement
jfc catering/facility rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : SB21B.4165.0

Amount of Each Disbursement this Period

1	7	4	2	.	9	2
---	---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

6	9	0	1	.	5	7
---	---	---	---	---	---	---

6	9	0	1	.	5	7
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BILL CASSIDY FOR US SENATE

Mailing Address PO BOX 80505

City State Zip Code
BATON ROUGE LA 70898

Purpose of Disbursement
transfer of net proceeds

Candidate Name
WILLIAM CASSIDY

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: LA District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : **SB22.4170**

Amount of Each Disbursement this Period

21912.45

Full Name (Last, First, Middle Initial)

B. CAPITO FOR WEST VIRGINIA

Mailing Address PO BOX 11519

City State Zip Code
CHARLESTON WV 25339

Purpose of Disbursement
transfer of net proceeds

Candidate Name
SHELLEY MOORE CAPITO

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: WV District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : **SB22.4169**

Amount of Each Disbursement this Period

11554.59

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City State Zip Code
LONE TREE CO 80124

Purpose of Disbursement
transfer of net proceeds

Candidate Name
CORY GARDNER

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CO District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : **SB22.4176**

Amount of Each Disbursement this Period

21912.45

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

55379.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. COTTON FOR SENATE

Mailing Address PO BOX 379

City DARDANELLE State AR Zip Code 72834

Purpose of Disbursement
transfer of net proceeds

Candidate Name
THOMAS COTTON

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: AR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SB22.4171

Amount of Each Disbursement this Period

18817.47

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR US SENATE INC

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement
transfer of net proceeds

Candidate Name
JONI K ERNST

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SB22.4174

Amount of Each Disbursement this Period

13824.24

Full Name (Last, First, Middle Initial)

C. JONI ERNST FOR US SENATE INC

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement
transfer of net proceeds

Candidate Name
JONI K ERNST

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SB22.4175

Amount of Each Disbursement this Period

6437.55

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

39079.26

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City RYE State NH Zip Code 03870

Purpose of Disbursement
transfer of net proceeds

Candidate Name
SCOTT BROWN

Office Sought: House
 Senate
 President
State: NH District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4168

Amount of Each Disbursement this Period

11554.59

Full Name (Last, First, Middle Initial)

B. ROUNDS FOR SENATE

Mailing Address PO BOX 250

City PIERRE State SD Zip Code 57501

Purpose of Disbursement
transfer of net proceeds

Candidate Name
MARION MICHAEL ROUNDS

Office Sought: House
 Senate
 President
State: SD District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4178

Amount of Each Disbursement this Period

5364.63

Full Name (Last, First, Middle Initial)

C. ROUNDS FOR SENATE

Mailing Address PO BOX 250

City PIERRE State SD Zip Code 57501

Purpose of Disbursement
transfer of net proceeds

Candidate Name
MARION MICHAEL ROUNDS

Office Sought: House
 Senate
 President
State: SD District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4179

Amount of Each Disbursement this Period

2475.98

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

19395.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. STEVE DAINES FOR MONTANA

Mailing Address PO BOX 1598

City HELENA State MT Zip Code 59624

Purpose of Disbursement
transfer of net proceeds

Candidate Name

STEVEN DAINES

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4172

Amount of Each Disbursement this Period

7840.61

Full Name (Last, First, Middle Initial)

B. STEVE DAINES FOR MONTANA

Mailing Address PO BOX 1598

City HELENA State MT Zip Code 59624

Purpose of Disbursement
transfer of net proceeds

Candidate Name

STEVEN DAINES

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4173

Amount of Each Disbursement this Period

3713.97

Full Name (Last, First, Middle Initial)

C. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
transfer of net proceeds

Candidate Name

DAN SULLIVAN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AK District: 00

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : SB22.4180

Amount of Each Disbursement this Period

19766.59

SUBTOTAL of Disbursements This Page (optional)..... ▶

31321.17

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FOUNDERS SENATE CANDIDATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. TERRI LYNN LAND FOR SENATE

Mailing Address PO BOX 308

City GRANDVILLE State MI Zip Code 49418

Purpose of Disbursement
transfer of net proceeds

Candidate Name
TERRI LYNN LAND

Office Sought: House
 Senate
 President
State: MI District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : **SB22.4177**

Amount of Each Disbursement this Period

21912.45

Full Name (Last, First, Middle Initial)

B. THOM TILLIS COMMITTEE

Mailing Address PO BOX 97396

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement
transfer of net proceeds

Candidate Name
THOM R TILLIS

Office Sought: House
 Senate
 President
State: NC District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2014

Transaction ID : **SB22.4181**

Amount of Each Disbursement this Period

21912.45

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

43824.90

189000.02
