

# 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. 12FE4M5

Preserving America's Traditions

ADDRESS (number and street) 610 S. Boulevard

Check if different than previously reported. (ACC) Tampa FL 33606

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

C C00383869

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:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)
- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)
- Election on  /  /  in the State of
- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)
- Election on  /  /  in the State of

5. Covering Period 10 / 16 / 2014 through 11 / 24 / 2014

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 Nancy H. Watkins

Signature of Treasurer Nancy H. Watkins [Electronically Filed] Date 12 / 02 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Preserving America's Traditions**

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=""/>	<input type="text" value="50957.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="91931.03"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="20640.99"/>	<input type="text" value="219096.42"/>
(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="112572.02"/>	<input type="text" value="270054.14"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14354.05"/>	<input type="text" value="171836.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="98217.97"/>	<input type="text" value="98217.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Preserving America's Traditions**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 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).....	0.00	15500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	15500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20500.00	201750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	20500.00	217250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	1673.69
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.).....	140.99	172.73
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))..... ▶	20640.99	219096.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20640.99	219096.42

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	4354.05	65736.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4354.05	65736.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	105500.00
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	600.00
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)) ..	14354.05	171836.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14354.05	171836.17

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20500.00	217250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20500.00	217250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4354.05	65736.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4354.05	65736.17

: 97 `A-G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

No expenditure, other than a direct contribution, was made on behalf of a specifically identified federal candidate. No expenditure was for a public communication that referred to a clearly identified candidate for Federal office and that promoted, supported, attacked or opposed any such candidate for Federal office.

Form/Schedule:

Transaction ID:

**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 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**Preserving America's Traditions**

Full Name (Last, First, Middle Initial) <b>A. Farm Credit Council PAC</b>		Date of Receipt
Mailing Address 50 F Street, N.W., #900		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20001		<b>Transaction ID : C-27-00bn02</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00193631"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Genesee &amp; Wyoming, Inc. PAC</b>		Date of Receipt
Mailing Address 3601 Concord Road, 2nd Floor		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City York State PA Zip Code 17402		<b>Transaction ID : C-34-00pE01</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00289058"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="1500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Husch Blackwell PAC</b>		Date of Receipt
Mailing Address 4801 Main Street, #1000		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City Kansas City State MO Zip Code 64112		<b>Transaction ID : C-40-00oM01</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00424382"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="3000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="3000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Preserving America's Traditions**

Full Name (Last, First, Middle Initial)  
**A. Investment Company Institute PAC**

Mailing Address 1401 H Street, N.W., #1200

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2014

**Transaction ID : C-42-002902**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. National Business Aviation Assn. PAC**

Mailing Address 1200 G Street, N.W., #1100

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00319723

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2014

**Transaction ID : C-54-001J01**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. Thrivent Financial for Lutherans-Emp. PAC**

Mailing Address P. O. Box 1892

City Appleton	State WI	Zip Code 54912
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2014

**Transaction ID : C-74-00oQ03**

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<b>TOTAL</b> 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 9 OF 13  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Preserving America's Traditions**

**A. Wellpoint, Inc. WellPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 Monument Circle  
 City Indianapolis State IN Zip Code 46204  
 FEC ID number of contributing federal political committee. **C** C00197228  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2014  
**Transaction ID : C-78-00p603**  
 Amount of Each Receipt this Period  
 1500.00

**B.**  
 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) ▼  
 Aggregate Year-to-Date ▼

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

**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) ▼  
 Aggregate Year-to-Date ▼

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 13  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Preserving America's Traditions**

**A.** Full Name (Last, First, Middle Initial)  
**Missy Thomas**

Mailing Address **228 S. Washington Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **172.73**

Date of Receipt  
**10 / 27 / 2014**

**Transaction ID : C-72-000w0E**

Amount of Each Receipt this Period  
**140.99**

restitution payment

**B.** 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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.99</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>140.99</b>

**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)  
**Preserving America's Traditions**

Full Name (Last, First, Middle Initial)

**A. Bellwether Consulting Group**

Mailing Address 325 7th Street, N.W., #400

City Washington State DC Zip Code 20004

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2014

Transaction ID : D15-000y1t

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Highwood Capital, LLC**

Mailing Address 915 E. Street, N.W., #613

City Washington State DC Zip Code 20004

Purpose of Disbursement PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2014

Transaction ID : D46-001n1K

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Petty Cash**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement petty cash-no item. req.

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2014

Transaction ID : D56-001s08

Amount of Each Disbursement this Period

296.70

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

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

3796.70

**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)  
**Preserving America's Traditions**

Full Name (Last, First, Middle Initial)

**A. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2014

**Transaction ID : D78-001710**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

500.00

4296.70

**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 type="checkbox"/> 22	<input checked="" 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)  
**Preserving America's Traditions**

Full Name (Last, First, Middle Initial)

**A. Bill Cassidy for U.S. Senate**

Mailing Address P. O. Box 80505

City State Zip Code  
Baton Rouge LA 70898

Purpose of Disbursement  
contribution-LA Sen

Candidate Name  
**William Cassidy**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Runoff

State: LA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2014

**Transaction ID : D16-00pJ01**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**B. Perdue for Senate**

Mailing Address 3110 Maple Drive, N.E, #400

City State Zip Code  
Atlanta GA 30305

Purpose of Disbursement  
contribution-GA Sen

Candidate Name  
**David Perdue**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

**Transaction ID : D54-00pl01**

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Amount of Each Disbursement this Period

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

10000.00
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**TOTAL** This Period (last page this line number only)..... ▶

10000.00
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