

The Charlie Hardy for U.S. Senate Committee

P.O. Box 1222

Cheyenne, Wyoming 82003

SECRETARY OF THE SENATE

15 FEB -5 AM 11:43

January 30, 2015

Secretary of the Senate

Office of Public Records

232 Hart Building

Washington, D.C. 20510-7116

Re: FEC identification Number C00554758.

To Whom It May Concern:

Enclosed is the yearend report for the 2014 election. Also enclosed are amended reports for

7/1/2014 through 7/31/2014

7/31/2014 through 9/30/2014,

10/1/2014 through 10/15/2014, and,

10/15/2014 through 11/24/2014

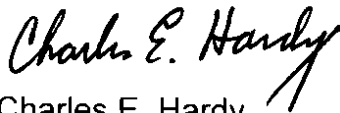
As of November 28, 2014, I assumed the role of treasurer for the Charlie Hardy for U.S. Senate Committee. The previous treasurer asked that he be relieved of his responsibilities following the general election.

In reviewing the reports of the previous treasurer, I find it necessary to make some corrections.

Also the post-general-election report (10/15/2014 through 11/24/2014) had to be prepared somewhat hastily and some information was not filled out correctly.

These entire reports have been modified and replaced by the amended reports contained herein.

Sincerely,



Charles E. Hardy

Treasurer

Charlie Hardy for U.S. Senate Committee

Enclosures (5).

15020093195

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRET / OF THE SENATE  
15 FEB -5 AM 11:43  
Office Use Only

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

12FE4M5

C H A R L I E H A R D Y F O R U S S E N A T E

ADDRESS (number and street)

P O X 1 2 2 2

Check if different than previously reported. (ACC)

C H E Y E N N E W Y 8 2 0 0 3 - 1 2 2 2

2. FEC IDENTIFICATION NUMBER ▼

C 0 0 5 5 4 7 5 8

CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
W Y

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period

M M / D D / Y Y Y Y 11 / 25 / 2014 through M M / D D / Y Y Y Y 12 / 31 / 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

CHARLES E HARDY

Signature of Treasurer

*Charles E. Hardy*

Date

M M / D D / Y Y Y Y 01 / 31 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

15020093196

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**CHARLIE HARDY FOR US SENATE**

Report Covering the Period: From: **11 25 2014** To: **12 31 2014**

|   | <b>COLUMN A<br/>This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|---|---------------------------------|--|
| <b>6. Net Contributions (other than loans)</b>  |                                 |  |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ...   | 4,286.21                        | 62,471.58                                  |
| (b) Total Contribution Refunds<br>(from Line 20(d)) ..  | 0.00                            | 0.00                                       |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a))...                              | 4,286.21                        | 62,471.58                                  |
| <b>7. Net Operating Expenditures</b>  |                                 |  |
| (a) Total Operating Expenditures<br>(from Line 17) ..   | 8,231.38                        | 87,303.35                                  |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14)...  | 0.00                            | 0.00                                       |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a))...  | 8,231.38                        | 87,303.35                                  |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27)...</b>                                       | 3,194.16                        |  |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D) ..</b>  | 0.00                            |  |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D)...</b> | 51,372.95                       |  |

**For further information contact:**

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

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

15020095197

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

CHARLIE HARDY FOR US SENATE

Report Covering the Period: From: 

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   | / | 25 |   | / | 2014 |   |   |   |

 To: 

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   | / | 31 |   | / | 2014 |   |   |   |

| I. RECEIPTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                    |
| (i) Itemized (use Schedule A)...   | 1,575.00                      | 28,764.64                          |
| (ii) Unitemized.....   | 2,711.21                      | 33,706.94                          |
| (iii) TOTAL of contributions from individuals .  | 4,286.21                      | 62,471.58                          |
| (b) Political Party Committees...  | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs)...   | 0.00                          | 0.00                               |
| (d) The Candidate.....   | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                 | 4,286.21                      | 62,471.58                          |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>   |                               |                                    |
|  | 0.00                          | 0.00                               |
| <b>13. LOANS:</b>  |                               |                                    |
| (a) Made or Guaranteed by the Candidate...   | 0.00                          | 29,209.41                          |
| (b) All Other Loans...   | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b))...   | 0.00                          | 29,209.41                          |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>                               |                               |                                    |
|  | 0.00                          | 0.00                               |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  |                               |                                    |
|  | 0.00                          | 0.00                               |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b> | 4,286.21                      | 91,680.99                          |

15020093198

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES...                                      | 8,231.38                      | 87,303.35                          |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..                    | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed by the Candidate...                | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                       | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...             | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                   |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees ...        | 0.00                          | 983.60                             |
| (b) Political Party Committees...                                  | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs) ..                   | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...  | 0.00                          | 983.60                             |
| 21. OTHER DISBURSEMENTS ...  | 0.00                          | 0.00                               |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 8,231.38                      | 88,286.95                          |

**III. CASH SUMMARY**

|  |           |
|--|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...                             | 7,339.33  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...                         | 4,286.21  |
| 25. SUBTOTAL (add Line 23 and Line 24)...  | 11,625.54 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...                            | 8,231.38  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)... | 3,394.16  |

15020093199

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

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

FOR LINE NUMBER: PAGE 5 OF 25  
(check only one)

|   |                              |                              |                              |                              |
|---|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 11e |
| <input type="checkbox"/> 12             | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

|  |   |   |
|--|---|---|
| A. Full Name (Last, First, Middle Initial)<br><b>APPLEGATE, JAMES</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>12 / 08 / 2014</b> |
| Mailing Address<br><b>PO BOX 612</b>   |   | Amount of Each Receipt this Period<br><b>25.00</b>              |
| City   | State                                   |   |
| <b>CHEYENNE, WY 82003</b>  |   | <b>2014 ELECTION DEBT</b>                                       |
| FEC ID number of contributing federal political committee.   | <b>C</b>                                |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>225.00</b> |   |

|  |   |   |
|--|---|---|
| B. Full Name (Last, First, Middle Initial)<br><b>ASMUS, FORREST</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>12 / 08 / 2014</b> |
| Mailing Address<br><b>1964 HOLMES AVE</b>  |   | Amount of Each Receipt this Period<br><b>200.00</b>             |
| City   | State                                   |   |
| <b>SHERIDAN, WY 82801</b>  |   | <b>2014 ELECTION DEBT</b>                                       |
| FEC ID number of contributing federal political committee.   | <b>C</b>                                |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>200.00</b> |   |

|  |   |   |
|--|---|---|
| C. Full Name (Last, First, Middle Initial)<br><b>BAUER, ELIZABETH</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br><b>12 / 29 / 2014</b> |
| Mailing Address<br><b>3302 S 44TH ST</b>   |   | Amount of Each Receipt this Period<br><b>50.00</b>              |
| City   | State                                   |   |
| <b>OMAHA, NE 68105</b>   |   | <b>2014 ELECTION DEBT</b>                                       |
| FEC ID number of contributing federal political committee.   | <b>C</b>                                |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>250.00</b> |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>275.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

15020093200

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

|   |                              |                              |                              |                              |
|---|------------------------------|------------------------------|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 6 OF 25                 |                              |
|   | (check only one)             |                              |                              |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 11e |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR US SENATE**

|  |  |   |
|--|--|---|
| A. Full Name (Last, First, Middle Initial)<br><b>FINNERTY, JACK</b>  |  | Date of Receipt<br>M M / D D / Y Y<br><b>12 / 24 / 2014</b> |
| Mailing Address<br><b>PO BOX 186</b>   |  | Amount of Each Receipt this Period<br><b>100.00</b>         |
| City   | State Zip Code<br><b>WHEATLAND, WY 82201</b> |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |  | <b>2014 ELECTION DEBT</b>                                   |
| Name of Employer   | Occupation                                   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>300.00</b>      |   |

|  |  |   |
|--|--|---|
| B. Full Name (Last, First, Middle Initial)<br><b>FISHEL, ANNE</b>  |  | Date of Receipt<br>M M / D D / Y Y<br><b>11 / 28 / 2014</b> |
| Mailing Address<br><b>201 S PEARL ST</b>   |  | Amount of Each Receipt this Period<br><b>500.00</b>         |
| City   | State Zip Code<br><b>CENTRALIA, WA 98531</b> |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |  | <b>2014 ELECTION DEBT</b>                                   |
| Name of Employer   | Occupation                                   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>500.00</b>      |   |

|  |   |   |
|--|---|---|
| C. Full Name (Last, First, Middle Initial)<br><b>HATCH, ANNE</b>   |   | Date of Receipt<br>M M / D D / Y Y<br><b>12 / 08 / 2014</b> |
| Mailing Address<br><b>5419 RIDGE ROAD</b>  |   | Amount of Each Receipt this Period<br><b>150.00</b>         |
| City   | State Zip Code<br><b>CHEYENNE, WY 82009</b> |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   | <b>2014 ELECTION DEBT</b>                                   |
| Name of Employer   | Occupation                                  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>250.00</b>     |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

15020093201

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

|   |                             |                              |                             |                             |
|---|-----------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:            |                              | PAGE 7 OF 25                |                             |
|   | (check only one)            |                              |                             |                             |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 1b | <input type="checkbox"/> 1c  | <input type="checkbox"/> 1d | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 3a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |                             |

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)  
**CHARLIE HARDY FOR US SENATE**

|  |   |   |
|--|---|---|
| A. Full Name (Last, First, Middle Initial)<br><b>RUSSELL, SHIRLEY</b>  |   | Date of Receipt<br>M M / D D / Y Y<br><b>12 / 08 / 2014</b> |
| Mailing Address<br><b>151 VALLEY DRIVE</b>   |   | Amount of Each Receipt this Period<br><b>100.00</b>         |
| City<br><b>CASPER, WY 82604</b>  | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   | 2014 ELECTION DEBT                      |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>200.00</b> |   |

|  |   |   |
|--|---|---|
| B. Full Name (Last, First, Middle Initial)<br><b>SCHAEFER, BARBARA</b>   |   | Date of Receipt<br>M M / D D / Y Y<br><b>12 / 23 / 2014</b> |
| Mailing Address<br><b>261 ROSEBURY COURT</b>   |   | Amount of Each Receipt this Period<br><b>50.00</b>          |
| City<br><b>MAYFIELD HEIGHTS, OH 44124</b>  | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   | 2014 ELECTION DEBT                      |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>200.00</b> |   |

|  |   |   |
|--|---|---|
| C. Full Name (Last, First, Middle Initial)<br><b>SEBERGER, BE</b>  |   | Date of Receipt<br>M M / D D / Y Y<br><b>12 / 29 / 2014</b> |
| Mailing Address<br><b>2010 ORVILLE</b>   |   | Amount of Each Receipt this Period<br><b>50.00</b>          |
| City<br><b>KANSAS CITY, KS 66102</b>   | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   | 2014 ELECTION DEBT                      |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>250.00</b> |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>200.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

15020093202



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

|   |                             |                              |                             |                             |
|---|-----------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:            |                              | PAGE 8 OF 25                |                             |
|   | (check only one)            |                              |                             |                             |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 1b | <input type="checkbox"/> 1c  | <input type="checkbox"/> 1d | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 3a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |                             |

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)  
**CHARLIE HARDY FOR US SENATE**

|  |   |   |
|--|---|---|
| A. Full Name (Last, First, Middle Initial)<br><b>BUDWICK, JOHN</b>   |   | Date of Receipt<br>M M D D Y Y<br>12 08 2014        |
| Mailing Address<br><b>149 COTTAGE ST</b>   |   | Amount of Each Receipt this Period<br><b>100.00</b> |
| City<br><b>MIDDLETOWN, NY 10940</b>  | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   | <b>2014 ELECTION DEBT</b>                           |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>300.00</b> |   |

|  |   |  |
|--|---|--|
| B. Full Name (Last, First, Middle Initial)<br><b>CHRISTOFFEL, TOM</b>  |   | Date of Receipt<br>M M D D Y Y<br>12 08 2014       |
| Mailing Address<br><b>195 S 35TH ST</b>  |   | Amount of Each Receipt this Period<br><b>50.00</b> |
| City<br><b>BOULDER, CO 80305</b>   | State Zip Code                          |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   | <b>2014 ELECTION DEBT</b>                          |
| Name of Employer   | Occupation                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>225.00</b> |  |

|  |   |  |
|--|---|--|
| C. Full Name (Last, First, Middle Initial)<br><b>FIECHTER, FRANCES</b>   |   | Date of Receipt<br>M M D D Y Y<br>12 24 2014       |
| Mailing Address<br><b>16822 E EASTER WAY</b>   |   | Amount of Each Receipt this Period<br><b>50.00</b> |
| City<br><b>AURORA, CO 80016</b>  | State Zip Code                          |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   | <b>2014 ELECTION DEBT</b>                          |
| Name of Employer   | Occupation                              |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>300.00</b> |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>200.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

15020093203

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

|   |  |                              |
|---|--|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 9 OF 25</span> |                              |
|   | (check only one)   |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b                                     | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a                                     | <input type="checkbox"/> 13b |
|   | <input type="checkbox"/> 14                                      | <input type="checkbox"/> 15  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR US SENATE**

|  |   |   |
|--|---|---|
| A. Full Name (Last, First, Middle Initial)<br><b>VAN HEULE, JOHN</b>   |   | Date of Receipt<br>M M / D D Y Y<br><b>12 02 2014</b> |
| Mailing Address<br><b>1565 N 21ST</b>  |   | Amount of Each Receipt this Period<br><b>50.00</b>    |
| City<br><b>LARAMIE, WY 82072</b>   | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   | 2014 ELECTION DEBT                      |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>250.00</b> |   |

|  |   |   |
|--|---|---|
| B. Full Name (Last, First, Middle Initial)<br><b>WEDEL, SUE</b>  |   | Date of Receipt<br>M M / D D Y Y<br><b>12 08 2014</b> |
| Mailing Address<br><b>802 SOUTH 12TH</b>   |   | Amount of Each Receipt this Period<br><b>100.00</b>   |
| City<br><b>LARAMIE, WY 82070</b>   | State Zip Code                          |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   | 2014 ELECTION DEBT                      |   |
| Name of Employer   | Occupation                              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><b>300.00</b> |   |

|   |                        |                                    |
|---|------------------------|------------------------------------|
| C. Full Name (Last, First, Middle Initial)  |                        | Date of Receipt                    |
| Mailing Address   |                        | Amount of Each Receipt this Period |
| City  | State Zip Code         |                                    |
| FEC ID number of contributing federal political committee.<br><b>C</b>  | 2014 ELECTION DEBT     |                                    |
| Name of Employer  | Occupation             |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date |                                    |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>150.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>1,575.00</b> |

15020093204

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 25

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

**CHARLIE HARDY US FOR SENATE**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Date of Disbursement

|    |   |    |   |      |   |
|----|---|----|---|------|---|
| M  | M | D  | D | Y    | Y |
| 12 |   | 02 |   | 2014 |   |

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

231.59

Purpose of Disbursement  
CANDIDATE PHONE LINE

Category/  
Type

SPECIFICATION:  
POST ELECTION  
EXPENSE

Candidate Name  
CHARLIE HARDY FOR

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: WY District:

Full Name (Last, First, Middle Initial)

**B. CENTURY LINK**

Date of Disbursement

|    |   |    |   |      |   |
|----|---|----|---|------|---|
| M  | M | D  | D | Y    | Y |
| 12 |   | 30 |   | 2014 |   |

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

426.14

Purpose of Disbursement  
CANDIDATE INTERNET

Category/  
Type

SPECIFICATION:  
POST ELECTION  
EXPENSE

Candidate Name  
CHARLIE HARDY

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: WY District:

Full Name (Last, First, Middle Initial)

**C. AM EX**

Date of Disbursement

|    |   |    |   |      |   |
|----|---|----|---|------|---|
| M  | M | D  | D | Y    | Y |
| 12 |   | 01 |   | 2014 |   |

Mailing Address

PO BOX 297812

City State Zip Code

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement  
CANDIDATE CREDIT CARD

Category/  
Type

MEMO CREDIT CARD  
PMT  
SPECIFICATION:  
POST ELECTION EXPENSE

Candidate Name  
CHARLIE HARDY

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: WY District:

1,057.73

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

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

15020093205

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE 11 OF 25   |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b |
|   | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c           | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |

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)  
**CHARLIE HARDY FOR US SENATE**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CITI CARD</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 28 / 2014          |
| Mailing Address  |   | Amount of Each Disbursement this Period<br>173.65                      |
| City   | State Zip Code  |  |
| Purpose of Disbursement<br>INTEREST ON CREDIT CARD   |   | MEMO CREDIT CARD<br>PMT<br>SPECIFICATION:<br>2014 CAMPAIGN<br>EXPENSES |
| Candidate Name<br>CHARLIE HARDY FOR  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |  |
| State: WY  | District:   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CITI CARD</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 30 / 2014          |
| Mailing Address  |   | Amount of Each Disbursement this Period<br>6,000.00                    |
| City   | State Zip Code  |  |
| Purpose of Disbursement<br>CANDIDATE CREDIT CARD   |   | MEMO CREDIT CARD<br>PMT<br>SPECIFICATION:<br>2014 CAMPAIGN<br>EXPENSES |
| Candidate Name<br>CHARLIE HARDY  |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |  |
| State: WY  | District:   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AM EX</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 30 / 2014 |
| Mailing Address<br>PO BOX 297812   |   | Amount of Each Disbursement this Period<br>1,000.00           |
| City   | State Zip Code<br>FT LAUDERDALE, FL 33329   |   |
| Purpose of Disbursement<br>CANDIDATE CREDIT CARD   |   | MEMO CREIDT<br>CARD PMT                                       |
| Candidate Name<br>CHARLIE HARDY  |   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) |   |
| State: WY  | District:   |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7,173.65 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 8,231.38 |

15020093206

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 2 OF 25

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

|  |   |  |
|--|---|--|
| Original Amount of Loan<br><b>809.41</b> | Cumulative Payment To Date<br><b>0.00</b> | Balance Outstanding at Close of This Period<br><b>809.41</b> |
|--|---|--|

|                         |               |                                |                                      |   |
|-------------------------|---------------|--------------------------------|--------------------------------------|---|
| TERMS<br><b>VARIOUS</b> | Date Incurred | Date Due<br><b>NO DUE DATE</b> | Interest Rate<br><b>0.00 % (apr)</b> | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|-------------------------|---------------|--------------------------------|--------------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶

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

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

15020093207

**SCHEDULE C (FEC Form 3)  
LOANS**

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

PAGE 3 OF 25

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan **80941** Cumulative Payment To Date **000** Balance Outstanding at Close of This Period **80941**

TERMS Date Incurred **VARIOUS** Date Due **NO DUE DATE** Interest Rate **000** % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
|--|--------------------------------|
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093208

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 14 OF 25

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

|   |  |   |
|---|--|---|
| Original Amount of Loan<br><b>4500.00</b> | Cumulative Payment To Date<br><b>000</b> | Balance Outstanding at Close of This Period<br><b>4500.00</b> |
|---|--|---|

TERMS

|                                    |                                |                                     |   |
|------------------------------------|--------------------------------|-------------------------------------|---|
| Date Incurred<br><b>02 05 2014</b> | Date Due<br><b>NO DUE DATE</b> | Interest Rate<br><b>000 % (apr)</b> | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------|--------------------------------|-------------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶

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

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

15020093209

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a 13b

NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR SENATE

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

HARDY, CHARLES E. PERSONAL FUNDS

Election:

- Primary (checked), General, Other (specify)

Mailing Address

PO BOX 1951

City

State

ZIP Code

CHEYENNE

WY

82003-1951

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

9500.00

0.00

9500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

02

14

2014

No DUE DATE

0.00 % (apr)

Yes No (checked)

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)...

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

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

15020093210



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 16 OF 25

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. PERSONAL FUNDS**

Election:

Primary  
 General  
 Other (specify) ▾

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**250.00**

Cumulative Payment To Date

**0.00**

Balance Outstanding at Close of This Period

**250.00**

TERMS

Date Incurred

**04 04 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

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

Carry outstanding balance only to LINE 9, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093211

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 3,500.00                | 0.00                       | 3,500.00                                    |

| TERMS | Date Incurred | Date Due    | Interest Rate | Secured:  |
|-------|---------------|-------------|---------------|---|
|       | 04 16 2014    | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

Carry outstanding balance only to LINE 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093212

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 18 OF 25

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Mailing Address  
**PO BOX 1957**

Election:  
 Primary  
 General  
 Other (specify) ▾

City **CHEYENNE** State **WY** ZIP Code **82003-1957**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 1,500.00                | 0.00                       | 1,500.00                                    |

TERMS

| Date Incurred | Date Due    | Interest Rate | Secured:  |
|---------------|-------------|---------------|---|
| 04 21 2014    | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093213

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 19 OF 25

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 900.00                  | 000                        | 900.00                                      |

TERMS Date Incurred **04 25 2014** Date Due **NO DUE DATE** Interest Rate **0.00 % (apr)** Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093214

**SCHEDULE C (FEC Form 3)  
LOANS**

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

PAGE 20 OF 25

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  Primary  General  Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 1,000.00                | 0.00                       | 1,000.00                                    |

TERMS

| Date Incurred | Date Due    | Interest Rate | Secured:  |
|---------------|-------------|---------------|---|
| 05 01 2014    | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093215

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 21 OF 23

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

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 1,000.00                | 0.00                       | 1,000.00                                    |

TERMS

| Date Incurred | Date Due    | Interest Rate | Secured:  |
|---------------|-------------|---------------|---|
| 05 07 2014    | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093216

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 22 OF 25

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  Primary  General  Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 3,400.00                | 0.00                       | 3,400.00                                    |

TERMS

| Date Incurred | Date Due    | Interest Rate | Secured:  |
|---------------|-------------|---------------|---|
| 05 23 2014    | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

Carry outstanding balance only to LINE 5, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093217

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 23 OF 25

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

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) \_\_\_\_\_

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|-------------------------|----------------------------|---|
| 350.00                  | 0.00                       | 350.00                                      |

TERMS

| Date Incured | Date Due    | Interest Rate | Secured:  |
|--------------|-------------|---------------|---|
| 06 05 2014   | NO DUE DATE | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

SUBTOTALS This Period This Page (optional)..... ▶

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

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

15020093218



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

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

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

Election:  
 Primary  
 General  
 Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

|  |   |  |
|--|---|--|
| Original Amount of Loan<br><b>2,500.00</b> | Cumulative Payment To Date<br><b>0.00</b> | Balance Outstanding at Close of This Period<br><b>2,500.00</b> |
|--|---|--|

TERMS

|                                    |                                  |                                      |   |
|------------------------------------|----------------------------------|--------------------------------------|---|
| Date Incurred<br><b>06 27 2014</b> | Date Due<br><b>"NO" DUE DATE</b> | Interest Rate<br><b>0.00 % (apr)</b> | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------|----------------------------------|--------------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                   |
|--|-----------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                  |
| Mailing Address                            | Occupation                        |
| City State ZIP Code                        | Amount Guaranteed Outstanding: \$ |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                  |
| Mailing Address                            | Occupation                        |
| City State ZIP Code                        | Amount Guaranteed Outstanding: \$ |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                  |
| Mailing Address                            | Occupation                        |
| City State ZIP Code                        | Amount Guaranteed Outstanding: \$ |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                  |
| Mailing Address                            | Occupation                        |
| City State ZIP Code                        | Amount Guaranteed Outstanding: \$ |

SUBTOTALS This Period This Page (optional)..... ▶

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

**79,209.41**

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

15020093219

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |  |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 25 OF 25                          |
|   | FOR LINE NUMBER: (check only one)      |
|   | <input type="checkbox"/> 9             |
|   | <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR U.S. SENATE**

|  |   |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>RAW IMAGE</b> | Nature of Debt (Purpose):<br><b>CAMPAIGN VIDEOS AND WEBSITE DEVELOPMENT</b> |
| Mailing Address<br><b>525 HAMPTON LANE</b>   |   |
| City State Zip Code<br><b>KEY BISCAYNE FL 33149</b>                                  |   |

|  |  |                                    |  |
|--|--|------------------------------------|--|
| Outstanding Balance Beginning This Period<br><b>2,462.09</b> | Amount Incurred This Period<br><b>0.00</b> | Payment This Period<br><b>0.00</b> | Outstanding Balance at Close of This Period<br><b>2,462.09</b> |
|--|--|------------------------------------|--|

|   |  |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>CITI CARDS</b> | Nature of Debt (Purpose):<br><b>CREDIT CARD DEBT</b> |
| Mailing Address<br><b>BOX 6500</b>  |  |
| City State Zip Code<br><b>SIOUX FALLS SD 57117</b>                                    |  |

|  |  |  |  |
|--|--|--|--|
| Outstanding Balance Beginning This Period<br><b>7,208.12</b> | Amount Incurred This Period<br><b>205.43</b> | Payment This Period<br><b>6,173.65</b> | Outstanding Balance at Close of This Period<br><b>1,239.90</b> |
|--|--|--|--|

|   |  |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>AMEX</b> | Nature of Debt (Purpose):<br><b>CREDIT CARD DEBT</b> |
| Mailing Address<br><b>P O BOX 297812</b>  |  |
| City State Zip Code<br><b>FT LAUDERDALE FL 33329-7812</b>                       |  |

|   |  |                                      |   |
|---|--|--------------------------------------|---|
| Outstanding Balance Beginning This Period<br><b>18,626.49</b> | Amount Incurred This Period<br><b>235.06</b> | Payment This Period<br><b>400.00</b> | Outstanding Balance at Close of This Period<br><b>18,461.55</b> |
|---|--|--------------------------------------|---|

|   |                  |
|---|------------------|
| 1) SUBTOTALS This Period This Page (optional) ...   |                  |
| 2) TOTALS This Period (last page this line number only) ...                                 | <b>22,163.54</b> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...                             | <b>29,209.41</b> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ... | <b>51,372.95</b> |

15020093220

Charlie Hardy for U.S. Senate Committee  
P.O. Box 1222  
Cheyenne WY 82003-1222

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.  
**CERTIFIED MAIL**



7014 2120 0004 6012 9289



1004



20510

**1st Class Mail**

U.S. POSTAGE  
PAID  
CHEYENNE, WY  
JAN 30, 15  
PMOUNT  
**\$16.55**  
0003872-1

Screened by  
Senate Post Office

FEB 00

RETURN RECEIPT  
REQUESTED

U.S. SENATE  
TRACKING NUMBER  
13-020060



Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, D.C. 20510-711

Screened by 16  
Senate Post Office

FEB 08 2015

12256002051

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED 1/30/15  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

|                  | SHIPPING DATE | NEXT BUSINESS DAY DELIVERY |
|------------------|---------------|----------------------------|
| FEDERAL EXPRESS  | _____         | <input type="checkbox"/>   |
| UPS              | _____         | <input type="checkbox"/>   |
| DHL              | _____         | <input type="checkbox"/>   |
| AIRBORNE EXPRESS | _____         | <input type="checkbox"/>   |

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

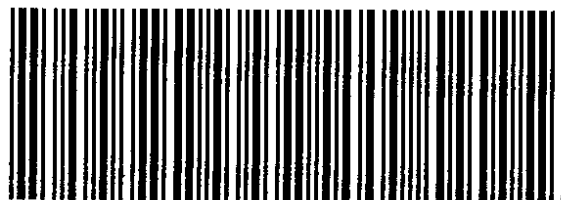
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 2/5/15

15020093222



SEN PATCH



SEN PATCH

15020093223