

SECRETARY OF THE SENATE

14 DEC -5 PM 3:53

Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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

12FE4M5

Stephen Shogan for Senate Committee

ADDRESS (number and street)

PO Box 370230

Check if different than previously reported. (ACC)

Denver

CO

80237

2. FEC IDENTIFICATION NUMBER ▼

C c00556530

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CO

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 MM/DD/YYYY in the State of CO

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

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

Election on MM/DD/YYYY in the State of CO

5. Covering Period

MM/DD/YYYY 10/16/2014

through MM/DD/YYYY 11/04/2014

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 Lisa Chaiken

Signature of Treasurer Lisa Chaiken

Date 12/03/2014

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

Office Use Only								
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140214022249

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 13

Write or Type Committee Name

Stephen Shogan for Senate Committee

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 / 04 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	7200.00	49272.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..	7200.00	49272.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	12365.00	95903.02
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	12365.00	95903.02
8. Cash on Hand at Close of Reporting Period (from Line 27)...	-2064.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	118000.00	

For further information contact:

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

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

14021402250

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

Stephen Shogan for Senate Committee

Report Covering the Period: From:

M	M
10	

 /

D	D
16	

 /

Y	Y	Y	Y
2014			

 To:

M	M
11	

 /

D	D
04	

 /

Y	Y	Y	Y
2014			

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

6250.00

46450.00

(ii) Unitemized.....

950.00

2822.00

(iii) TOTAL of contributions from individuals .

7200.00

49272.00

(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))..

7200.00

49272.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

73000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

73000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

7200.00

122272.00

14021402251

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	12365.00	95903.02
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	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 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	12365.00	95903.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	3100.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7200.00
25. SUBTOTAL (add Line 23 and Line 24)...	10300.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	12365.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	-2064.76

14021402252

**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 13
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Stephen Shogan for Senate Committee

A. Full Name (Last, First, Middle Initial)
Barb Gallivan

Mailing Address 721 Jacksn St

City State Zip Code
Denver CO 80206

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2014

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Sue Hoover Hamblin

Mailing Address 466 Lorroway Dr

City State Zip Code
Castle Rock CO 80108

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2014

Transaction ID : SA11AI.4474

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Ken Hamblin

Mailing Address 466 Lorroway Dr

City State Zip Code
Castle Rock CO 80108

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2014

Transaction ID : SA11AI.4475

Amount of Each Receipt this Period
2600.00

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

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

6000.00

14021402253

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stephen Shogan for Senate Committee

A. Full Name (Last, First, Middle Initial)
Andrew Parker

Mailing Address 5000 e oxford avenue

City State Zip Code
cherry hills village CO 80113

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

Name of Employer Occupation
orthopedic associates surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2014

Transaction ID : SA11AI.4477

Amount of Each Receipt this Period
250.00

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)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

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)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

250.00

6250.00

14021402254

**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 7 OF 13
	<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	

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NAME OF COMMITTEE (In Full)
Stephen Shogan for Senate Committee

Full Name (Last, First, Middle Initial) A. Sarah Binder		Date of Disbursement MM / DD / YYYY 11 / 04 / 2014
Mailing Address unknown		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4492
City denver	State CO	
Purpose of Disbursement	Zip Code	
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dash Valley Enterprises		Date of Disbursement MM / DD / YYYY 11 / 04 / 2014
Mailing Address 466 Lorroway Dr.		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.4491
City Castle Rock	State CO	
Purpose of Disbursement	Zip Code 80104	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. L2		Date of Disbursement MM / DD / YYYY 11 / 04 / 2014
Mailing Address		Amount of Each Disbursement this Period 6435.00 Transaction ID : SB17.4495
City	State	
Purpose of Disbursement email lists	Zip Code	
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	11935.00
TOTAL This Period (last page this line number only)	

14021402255

**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)

<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

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NAME OF COMMITTEE (In Full)

Stephen Shogan for Senate Committee

Full Name (Last, First, Middle Initial)

A. Post Modern Company

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2014

Amount of Each Disbursement this Period

430.00

Transaction ID : SB17.4497

004
Category/
Type

B.

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

430.00

12365.00

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

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

14021402256

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4111**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Stephen Shogan Primary
Mailing Address General
55 Charlou Circle Other (specify) ▼

City State ZIP Code
Englewood CO 80111

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 0.00 20000.00

TERMS Date Incurred Date Due Interest Rate Secured:
M 01 / D 29 / Y 2014 M M / D D / Y none 0.00 % (apr) 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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.

14021402257

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)

Transaction ID : SC/10.4113

Stephen Shogan for Senate Committee

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

[PERSONAL FUNDS]

Election: 2014

Stephen Shogan

Primary
 General
 Other (specify) ▼

Mailing Address
55 Charlou Circle

City State ZIP Code
Englewood CO 80111

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 03 / D 20 / Y 2014
Date Due: M M / D D / Y none
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)...

25000.00

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

[]

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

14021402258

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)

Transaction ID : SC/10.4284

Stephen Shogan for Senate Committee

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

Stephen Shogan

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
55 Charlou Circle

City State ZIP Code
Englewood CO 80111

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 04 / D 16 / Y 2014
Date Due: M M / D D / Y none
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) ..

50000.00
[]

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

14021402259

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)

Transaction ID : SC/10.4285

Stephen Shogan for Senate Committee

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

Stephen Shogan

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
55 Charlou Circle

City State ZIP Code
Englewood CO 80111

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 05 / D 21 / Y 2014
Date Due: M M / D D / Y none
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)...	15000.00
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.

14021402260

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)

Transaction ID : SC/10.4346

Stephen Shogan for Senate Committee

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

Stephen Shogan

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
55 Charlou Circle

City State ZIP Code
Englewood CO 80111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

TERMS

Date Incurred: M 06 / D 20 / Y 2014
Date Due: M M / D D / Y Y Y Y Y Y none
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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)...	8000.00
TOTALS This Period (last page in this line only) ..	118000.00

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

14021402261

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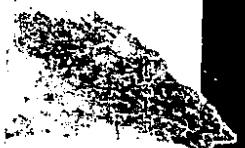
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A CUSTOMS DECLARATION
LABEL MAY BE REQUIRED.



Label 127R, February 2008

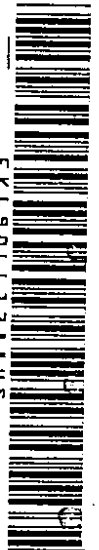
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Postage

Date Accepted (MM/DD/YYYY)

Scheduled Delivery Time

Insurance Fee

Weight

Rate

Live Annual Transportation Fee

Time Accepted

10:30 AM Delivery Fee

Return Receipt Fee

Rate

Sunday/Holiday Premium Fee

Total Postage & Fees

Weight

Rate

Live Annual Transportation Fee

Time Accepted

10:30 AM Delivery Fee

Return Receipt Fee

Rate

Sunday/Holiday Premium Fee

Total Postage & Fees

Weight

Rate

Live Annual Transportation Fee

Time Accepted

10:30 AM Delivery Fee

Return Receipt Fee

Rate

Sunday/Holiday Premium Fee

Total Postage & Fees

Weight

Rate

Live Annual Transportation Fee

Time Accepted

10:30 AM Delivery Fee

Return Receipt Fee

Rate

Sunday/Holiday Premium Fee

Total Postage & Fees

Weight

Rate

Live Annual Transportation Fee

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Sunday/Holiday Premium Fee

Total Postage & Fees

Weight

Rate

Live Annual Transportation Fee

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This packet

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SECRETARY

DANA K. MCCALLUM
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SUITE 232
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PHONE: (202) 224-0322

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 _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

12/3/14

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

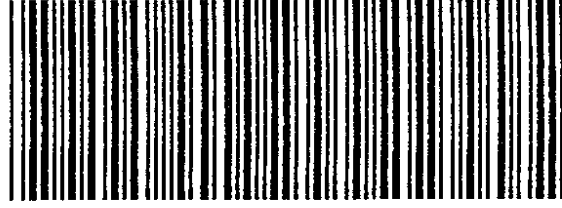
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

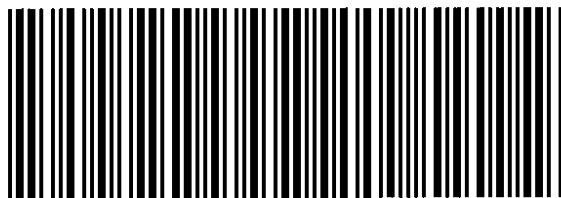
PREPARER MN

DATE PREPARED 12/15/14

14021402263



SEN PATCH



SEN PATCH

14021402264