

# FEC FORM 3L

## REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS AND LOBBYIST/REGISTRANT PACs

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS  
14 OCT 20 PM 12:24

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4M5**  
**TEXANS FOR SENATOR JOHN CORNYN INC**

ADDRESS (number and street) **PO BOX 13026**

Check if different than previously reported. (ACC) **AUSTIN TX 78711**  
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** **C00369033**  
3. IS THIS REPORT  **NEW (N)** OR  **AMENDED (A)**  
4. STATE DISTRICT  
For Candidates Only

5. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2) and/or Semi-annual Report  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE) and/or Semi-annual Report  
 July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7) and/or Semi-annual Report  Oct 20 (M10)  Jan 31 (YE) and/or Semi-annual Report  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Special (12S)  Convention (12C)  
Election on [ ] / [ ] / [ ] in the State of [ ]  
This report also covers the semi-annual period  See Line 6(b)  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] / [ ] / [ ] in the State of [ ]  
This report also covers the semi-annual period  See Line 6(b)

6. Covered Period(s)  
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period  
This report covers [07] / [01] / [2014] through [09] / [30] / [2014] and/or  
(b) Semi-annual Covered Period  
 January 1 - June 30  
 July 1 - December 31

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs  
(a) Quarterly/Monthly/Pre-/Post-Election Covered Period **53000.00**  
(b) Semi-annual Covered Period

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 **Kerry N. Cammack**

Signature of Treasurer *Kerry N. Cammack* Date **10 / 13 / 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.

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