

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 16 AUG 26 AM 9:18 Office Use Only

1 NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

REGINALD LUSTER FOR US SENATE

ADDRESS (number and street) 1751 UNIVERSITY BLVD SOUTH

Check if different than previously reported. (ACC)

JACKSONVILLE

FL 32216

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00620526

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

✓

STATE DISTRICT FL

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

08 30 2016

in the State of

FL

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2016 through 08 10 2016

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 Hubert W Gill and Mamie Davis

Signature of Treasurer Hubert W Gill and Mamie Davis

Date 08 15 2016

NOTE. Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109

Office Use Only

FEC FORM 3 (Revised 02/2003)

201608260200363258

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

**REGINALD LUSTER For US SENATE**

Report Covering the Period: From:

**07 01 2016**

To: **08 10 2016**

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))...	1172192	2802892
(b) Total Contribution Refunds (from Line 20(d)) ..	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	1172192	2802892
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	1314054	2649421
(b) Total Offsets to Operating Expenditures (from Line 14)...	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	1314054	2649421
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	505633	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>	3915.00	

For further information contact:

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

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

201608260200363259

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

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

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**REGINALD LUSTER FOR US SENATE**

A. Full Name (Last, First, Middle Initial)  
**Chandler Tommy**

Mailing Address  
**10991 Burnt Mill Road #1301**

City State Zip Code  
**Jacksonville FL 32256**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**05 23 2016**

Amount of Each Receipt this Period  
**0.00**

Memo Item

B. Full Name (Last, First, Middle Initial)  
**Curtis Miranda**

Mailing Address  
**7025 West Lyster Cir**

City State Zip Code  
**Jacksonville FL 32209**

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

Name of Employer Occupation  
**Retired Retired**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt  
**05 23 2016**

Amount of Each Receipt this Period  
**0.00**

Memo Item

C. Full Name (Last, First, Middle Initial)  
**Platts Eleanor**

Mailing Address  
**4751 Sherman Hills Parkway**

City State Zip Code  
**Jacksonville FL 32221**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

Date of Receipt  
**05 23 2016**

Amount of Each Receipt this Period  
**0.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **0.00**

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

201608260200363260

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

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

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NAME OF COMMITTEE (In Full)  
**Reginald Luster for US Senate**

A. Full Name (Last, First, Middle Initial)  
**Jones W Kenneth**

Mailing Address  
**8219 SABAL OAK LN**  
City: **Jacksonville** State: **FL** Zip Code: **32256**

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

Name of Employer: **St Vincent's Ambulatory** Occupation: **Doctor**

Receipt For:  Primary  General Other (specify)

Election Cycle-to-Date: **.250.00**

Date of Receipt: **06 20 2016**

Amount of Each Receipt this Period: **0.00**

Memo Item

B. Full Name (Last, First, Middle Initial)  
**Prier SR. Lemorris**

Mailing Address  
**10990 Hickory Trace LN**  
City: **Jacksonville** State: **FL** Zip Code: **32256**

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

Name of Employer: Occupation:

Receipt For:  Primary  General Other (specify)

Election Cycle-to-Date: **.250.00**

Date of Receipt: **06 20 2016**

Amount of Each Receipt this Period: **0.00**

Memo Item

C. Full Name (Last, First, Middle Initial)  
**Clark Lorraine**

Mailing Address  
**13436 Nottingham Knoll CT**  
City: **Jacksonville** State: **FL** Zip Code: **32225**

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

Name of Employer: Occupation:

Receipt For:  Primary  General Other (specify)

Election Cycle-to-Date: **.750.00**

Date of Receipt: **06 20 2016**

Amount of Each Receipt this Period: **0.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

201608260200363261

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

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

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Reginald Luster for US Senate**

A. Full Name (Last, First, Middle Initial)  
**Smith Michelle**

Mailing Address  
**7800 West Oakland PK Blvd #B304**

City State Zip Code  
**Sunrise FL 33351**

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

Name of Employer Occupation  
**Smith Law Firm Attorney**

Receipt For: Election Cycle-to-Date  
Primary General  
Other (specify) ▼ **1.000.00**

Date of Receipt  
**07 16 2016**

Amount of Each Receipt this Period  
**1 000 00**

Memo Item

B. Full Name (Last, First, Middle Initial)  
**Brown Harris**

Mailing Address  
**4015 Duval DR**

City State Zip Code  
**Jacksonville FL 32250**

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

Name of Employer Occupation  
**Harris Brown PA Attorney**

Receipt For: Election Cycle-to-Date  
Primary General  
Other (specify) ▼ **50000**

Date of Receipt  
**07 16 2016**

Amount of Each Receipt this Period  
**50000**

Memo Item

C. Full Name (Last, First, Middle Initial)  
**Dunson Robin**

Mailing Address  
**3126 Heybridge LN**

City State Zip Code  
**Milton GA 30004**

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

Name of Employer Occupation  
**COX Attorney**

Receipt For: Election Cycle-to-Date  
Primary General  
Other (specify) ▼

Date of Receipt  
**07 26 2016**

Amount of Each Receipt this Period  
**30000**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ **1 800 00**

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

201608260200363262

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

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

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NAME OF COMMITTEE (In Full)  
**Reginald Luster For US Senate**

A. Full Name (Last, First, Middle Initial) <b>Luster Reginald</b>		Date of Receipt <b>06 09 2016</b>
Mailing Address <b>3017 Southern Hills Cir W</b>		Amount of Each Receipt this Period <b>2500.00</b>
City <b>Jacksonville</b>	State Zip Code <b>FL 32225</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer <b>Reginald Luster PA</b>	Occupation <b>Attorney</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date <b>12.500.00</b>	

B. Full Name (Last, First, Middle Initial) <b>Robinson James</b>		Date of Receipt <b>07 19 2016</b>
Mailing Address <b>2396 N Edgewood Ave</b>		Amount of Each Receipt this Period <b>.250.00</b>
City <b>Jacksonville</b>	State Zip Code <b>FL 32254</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer <b>Robinson Chiropractor</b>	Occupation <b>Chiropractor</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date <b>.250.00</b>	

C. Full Name (Last, First, Middle Initial) <b>Wilson Carter</b>		Date of Receipt <b>"</b>
Mailing Address <b>6910 Atlantic Blvd</b>		Amount of Each Receipt this Period <b>350.00</b>
City <b>Jacksonville</b>	State Zip Code <b>FL 32211</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item
Name of Employer <b>Advanced Health Care CR</b>	Occupation <b>MD</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date <b>.350.00</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>3,100.00</b>
TOTAL This Period (last page this line number only).....	<b>4,900.00</b>

201608260200363263

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17 OPERATING EXPENDITURES...	1314054	1335367
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0	000
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0	000
(b) Of All Other Loans .....	0	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0	000
(b) Political Party Committees...	0	000
(c) Other Political Committees (such as PACs)...	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0	000
21 OTHER DISBURSEMENTS ..	0	000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1314054	1335367

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	525333
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1172192
25. SUBTOTAL (add Line 23 and Line 24)...	1697525
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	1191892
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	505633

201608260200363264

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

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

NAME OF COMMITTEE (In Full)  
*Reginald Luster For US Senate*

LOAN SOURCE Full Name (Last, First, Middle Initial)  Memo Item  
*Business Loan - Reginald Luster PA*

Election:  
 Primary  
 General  
 Other (specify) ▾

Mailing Address  
*1751 University Blvd S*

City State ZIP Code  
*Jacksonville FL 32216*

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<i>1,300.00</i>	<i>.00</i>	<i>1,300.00</i>

TERMS Date Incurred Date Due Interest Rate Secured:

*0.5 00 2016* ... *0%* (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:
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.

201608260200363265



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

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

NAME OF COMMITTEE (In Full)  
**Reginald Luster For US Senate**

LOAN SOURCE Full Name (Last, First, Middle Initial) <b>Business Loan - Reginald Luster PA</b>	Memo Item	Election: Primary General Other (specify) ▼
Mailing Address <b>1751 University Blvd S</b>		

City <b>Jacksonville</b>	State <b>FL</b>	ZIP Code <b>32216</b>
-----------------------------	--------------------	--------------------------

Original Amount of Loan <b>1 000 00</b>	Cumulative Payment To Date <b>1 000 00</b>	Balance Outstanding at Close of This Period <b>1 000 00</b>
--	---	--

TERMS	Date Incurred <b>04 20 2016</b>	Date Due	Interest Rate <b>0 % (apr)</b>	Secured: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
-------	------------------------------------	----------	-----------------------------------	---

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.

201608260200363266

FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(Used By A Principal Campaign Committee)

Principal Campaign Committee (In Full)  
 Reginald Luster for  
 U.S. Senator

Report Covering Period:

From: 07 01 2016

To: 08 10 2016

Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees		
Total Last Page Only					
(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
0	2500	11,721.92	0	0	1615.00
(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Debits & Obligations Owed to Committee
0	0	0	0	0	0
(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
0	0	0	0	0	0
(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debits & Obligations Owed TO the Committee
0	0		5253.33	5,056.33	0
(aa) Line No. 6 Total Contributions by the Candidate	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
3915	11,721.92	13,140.54			

201608260200363267

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

**REGINALD LUSTER FOR US SENATE**

Report Covering the Period: From: **07 16 2016** To: **08 16 2016**

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)...	4,900.00	10,200.00
(ii) Unitemized .....	4,321.92	5,328.92
(iii) TOTAL of contributions from individuals	9,221.92	15,528.92
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs)...		
(d) The Candidate .....	2,500.00	12,500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11,721.92	28,028.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0	0
(b) All Other Loans...		
(c) TOTAL LOANS (add Lines 13(a) and (b))...	1,615.00	3,915.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	13,336.92	31,943.92

201608260200363268

729

2  
15:00  
2955  
08.24

ED  
CTION



United States Sena  
Post Office

INSPECTION

ORIGIN ID:NRBA (904) 725-6655  
REGINALD LUSTER  
1751 UNIVERSITY BLVD. SO.  
JACKSONVILLE, FL 32216  
UNITED STATES US

SHIP DATE: 23AUG16  
ACTWGT: 0.50 LB  
CAD: 106020810INNET3790

BILL SENDER

TO JULIE E. ADAMS  
SECRETARY OF THE SENATE  
232 HART SENATE OFFICE BUILDING

544 J11/37014EB

WASHINGTON DC 20510  
(202) 224-0322 REF-  
INV. DEPT.  
PO



WED - 24 AUG 3:00P  
STANDARD OVERNIGHT

TRK# 7770 6126 2955  
0201

XC YKNA

20510  
DC-US IAD



Screened by  
Senate Post Office  
AUG 24 2016

Screened by 23  
Senate Post Office

AUG 24 2016

United States Senate  
Post Office

INSPECTION

United States Senate  
Post Office

692295007092809102

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
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	<u>8-23-16</u>	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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

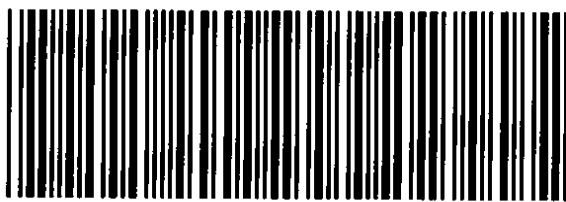
POSTMARK ILLEGIBLE  NO POSTMARK

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

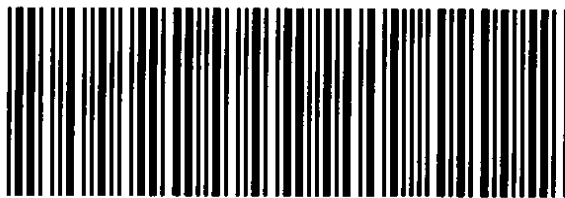
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 8-25-16

201608260200363270



SEN PATCH



SEN PATCH

201608260200363271