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(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1000 or more, received within 20 days of the election.

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1. NAME OF COMMITTEE IN FULL
FRIENDS OF CHRIS MCDANIEL

ADDRESS (number and street) POST OFFICE BOX 125

CITY, STATE, and ZIP CODE
LAUREL MS 39441

2. NAME OF CANDIDATE
CHRISTOPHER BRIAN MCDANIEL

3. OFFICE SOUGHT (State and District)
Senate MS 00

4. FEC IDENTIFICATION NUMBER
C00550657

5. IS THIS AN AMENDMENT? ☐ NO, THIS IS A NEW FILING ☒ YES, IT AMENDS THE NOTICE FILED ON 5 / 29 / 14

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer / Occupation	Date (month, day, year)	Amount
ZANE JONES 405 CHRISLYN ST TROY TX 76579-2797	BROOKSHIRE BROTHERS **Transaction ID : F6.81483** Occupation: PHARMACIST	05/28/2014	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
JOHN PECK JR. P.O. BOX 829 RANCHO SANTE FE CA 92067	PECK ENTERPRISES **Transaction ID : F6.31211** Occupation: REAL ESTATE INVESTOR	05/29/2014	1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
ROBERT E RICHARDSON 54969 WOODHOLD COURT ELKHART IN 46516	RETIRED **Transaction ID : F6.31209** Occupation: RETIRED	05/27/2014	1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
MARGARET SAVERCOOL 3605 CAMP MINEOLA ROAD MATTITUCK NE 11952	SELF-EMPLOYED **Transaction ID : F6.31212** Occupation: CONSULTANT	05/28/2014	2600.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**

SIGNATURE (optional)
MELANIE SOJOURNER

DATE
05/29/2014

For further information contact:
Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-694-1100

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FEC FORM 6
(Revised 07/2011)

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United States Senate

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