

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 15 FEB -5 AM 11:45 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 CHARLIE HARDY FOR U.S. SENATE

ADDRESS (number and street) P.O. BOX 1222 CHEYENNE WY 82003-1222

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00554758 3. IS THIS REPORT NEW OR AMENDED X

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 19 2014 in the State of WY

(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 2014 through 07 30 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 07 27 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.

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3 (Revised 02/2003)

15020093273

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CHARLIE HARDY FOR SENATE

Report Covering the Period:

From:

07 01 2014

To:

07 30 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))...	300713	2685603
(b) Total Contribution Refunds (from Line 20(d)) ...	000	99360
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	300713	2587243
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ...	330119	5247449
(b) Total Offsets to Operating Expenditures (from Line 14)...	000	000
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	330119	5247449
8. Cash on Hand at Close of Reporting Period (from Line 27)...	260735	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) ...	000	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)...	4366399	

For further information contact:

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

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

15020093274

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

CHARLIE HARDY FOR SENATE

Report Covering the Period: From: **07 01 2014** To: **07 30 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) ...	1,500.00	12,286.68
(ii) Unitemized	1,507.13	14,569.35
(iii) TOTAL of contributions from individuals . ▶	3,007.13	26,856.03
(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))..	3,007.13	26,856.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
	0.00	0.00
13. LOANS:		
(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
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)... ▶	3,007.13	56,065.44

15020093275

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	3301.19	52,474.49
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) ►	3,301.19	53,458.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	2,901.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	3,007.13
25. SUBTOTAL (add Line 23 and Line 24)...	5,908.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	3,301.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2,607.35

15020093276

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				
	<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

Full Name (Last, First, Middle Initial) A. ALLBRIGHT, JOSEPH			Date of Receipt 07 05 2014
Mailing Address PO BOX 9760			Amount of Each Receipt this Period 500 00
City JACKSON	State WY	Zip Code 83002	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500 00
Name of Employer FLAT CREEK RANCH	Occupation OWNER		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date 500 00		

Full Name (Last, First, Middle Initial) B. KUNSTEL, MARCIA			Date of Receipt 07 05 2014
Mailing Address PO BOX 9760			Amount of Each Receipt this Period 500 00
City JACKSON	State WY	Zip Code 83002	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500 00
Name of Employer FLAT CREEK RANCH	Occupation OWNER		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date 500 00		

Full Name (Last, First, Middle Initial) C. JOURGENSEN, PETER			Date of Receipt 07 21 2014
Mailing Address PO BOX 9550			Amount of Each Receipt this Period 250 00
City JACKSON	State WY	Zip Code 83002	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250 00
Name of Employer RETIRED	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date 250 00		

SUBTOTAL of Receipts This Page (optional).....	1250 00
TOTAL This Period (last page this line number only).....	

15020093277

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 6 OF 25	
	<input checked="" 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)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) JORGENSEN, JEAN		Date of Receipt 07 21 2014
Mailing Address PO BOX 9550		Amount of Each Receipt this Period 250.00
City JACKSON	State WY	
Zip Code 83002		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary General Other (specify)	Election Cycle-to-Date 250.00	
Full Name (Last, First, Middle Initial)		

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. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)		

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. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	1,500.00

15020093278

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement 07 07 2014	
Mailing Address PO BOX 297812		Amount of Each Disbursement this Period 23300	
City FT. LAUDERDALE	State FL		Zip Code 33329-7812
Purpose of Disbursement CREDIT CARD PAYMENT-SEE BELOW			Category/ Type 001
Candidate Name CHARLIE HARDY			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WY District:			

Full Name (Last, First, Middle Initial) B. GASAMAT		Date of Disbursement 05 30 2014	
Mailing Address 620 E. 1600 ST		Amount of Each Disbursement this Period 3135 MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.	
City CHEYENNE	State WY		Zip Code 82001
Purpose of Disbursement FUEL FOR CAMPAIGN VAN			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WY District:			

Full Name (Last, First, Middle Initial) C. WYOMING TROPHY & ENGRAVING		Date of Disbursement 05 30 2014	
Mailing Address 1620 THOMAS AVE.		Amount of Each Disbursement this Period 59053 MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.	
City CHEYENNE	State WY		Zip Code 82001
Purpose of Disbursement PRINTING CAMPAIGN MATERIALS			Category/ Type
Candidate Name CHARLIE HARDY			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WY District:			

SUBTOTAL of Disbursements This Page (optional).....	23300
TOTAL This Period (last page this line number only).....	

15020093279

**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 8 OF 25
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) A. GASAMAT		Date of Disbursement 05 31 2014
Mailing Address 600 E. 16th ST.		Amount of Each Disbursement this Period 10 12 MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.
City CHEYENNE	State WY	
Zip Code 82001		
Purpose of Disbursement FUEL FOR CAMPAIGN VEHICLE		
Candidate Name CHARLIE HARDY		Category/Type
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify)	
State: WY District:		
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement 06 04 2014
Mailing Address 1225 DEL RANGE BLVD.		Amount of Each Disbursement this Period 44 06 MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.
City CHEYENNE	State WY	
Zip Code 82001		
Purpose of Disbursement CAMPAIGN PRINTING		
Candidate Name CHARLIE HARDY		Category/Type
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify)	
State: WY District:		
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement 06 08 2014
Mailing Address FRONTIER MALL		Amount of Each Disbursement this Period 220 93 MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.
City CHEYENNE	State WY	
Zip Code 82001		
Purpose of Disbursement TELEPHONE		
Candidate Name CHARLIE HARDY		Category/Type
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify)	
State: WY District:		
Full Name (Last, First, Middle Initial)		

SUBTOTAL of Disbursements This Page (optional).....	000
TOTAL This Period (last page this line number only).....	

15020093280

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement 06 08 2014
Mailing Address 1225 DEL RANGE BLVD.		Amount of Each Disbursement this Period 317
City CHEYENNE WY	State WY	
Zip Code 82001		MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.
Purpose of Disbursement OFFICE SUPPLIES		
Candidate Name CHARLIE HARDY		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: WY District:		

Full Name (Last, First, Middle Initial) B. GASAMAT		Date of Disbursement 06 08 2014
Mailing Address 020 E. 16th ST.		Amount of Each Disbursement this Period 4062
City CHEYENNE WY	State WY	
Zip Code 82001		MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.
Purpose of Disbursement GAS FOR CAMPAIGN VEHICLE		
Candidate Name CHARLIE HARDY		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: WY District:		

Full Name (Last, First, Middle Initial) C. GASAMAT		Date of Disbursement 06 21 2014
Mailing Address 620 E. 16th ST.		Amount of Each Disbursement this Period 3866
City CHEYENNE WY	State WY	
Zip Code 82001		MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014
Purpose of Disbursement GAS FOR CAMPAIGN VEHICLE		
Candidate Name CHARLIE HARDY		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: WY District:		

SUBTOTAL of Disbursements This Page (optional).....	000
TOTAL This Period (last page this line number only).....	

15020093281

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) A. REMAX CAPITOL PROPERTIES		Date of Disbursement 07 08 2014
Mailing Address 4000 CENTRAL AVE.		Amount of Each Disbursement this Period 900 00
City CHEYENNE WY	State WY Zip Code 82001	
Purpose of Disbursement CAMPAIGN OFFICE RENTAL	Candidate Name CHARLIE HARDY	
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WY District:		

Full Name (Last, First, Middle Initial) B. REMAX CAPITOL PROPERTIES		Date of Disbursement 07 08 2014
Mailing Address 4000 CENTRAL AVE.		Amount of Each Disbursement this Period 1100 00
City CHEYENNE WY	State WY Zip Code 82001	
Purpose of Disbursement CAMPAIGN STAFF APT. RENTAL	Candidate Name CHARLIE HARDY	
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WY District:		

Full Name (Last, First, Middle Initial) C. WILKINSON, BRUCE		Date of Disbursement 07 01 2014
Mailing Address 816 ADAMS ST. SE		Amount of Each Disbursement this Period 187 13 IN-KIND
City OLYMPIA WA	State WA Zip Code 98501	
Purpose of Disbursement CAMPAIGN VEHICLE LOANED VALUE	Candidate Name CHARLIE HARDY	
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WY District:		

SUBTOTAL of Disbursements This Page (optional).....	2000 00 2187.13
TOTAL This Period (last page this line number only).....	

15020093282

**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 1 OF 25

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial)

A. **SONADA, BARBARA**

Date of Disbursement

07 26 2014

Mailing Address

City **ROCKSPRINGS** State **WY** Zip Code **82901**

Amount of Each Disbursement this Period

210.00

Purpose of Disbursement

PARADE PERMIT + ADVERTISING

Candidate Name

CHARLIE HARDY

Category/Type

Office Sought:

House
 Senate
President

Disbursement For:

Primary General
Other (specify)

State: **WY** District:

Full Name (Last, First, Middle Initial)

B. **WILKERSON, BRUCE**

Date of Disbursement

07 15 2014

Mailing Address

816 ADAMS ST. SE

City **OLYMPIA** State **WA** Zip Code **98501**

Amount of Each Disbursement this Period

640.79

Purpose of Disbursement

CAMPAIGN VEH. FUEL REIMB.

Candidate Name

CHARLIE HARDY

Category/Type

Office Sought:

House
 Senate
President

Disbursement For:

Primary General
Other (specify)

State: **WY** District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:

House
Senate
President

Disbursement For:

Primary General
Other (specify)

State: District:

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

850.79

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

15020093283

**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 12 OF 25

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
CHARLIE HARDY FOR SENATE

Full Name (Last, First, Middle Initial) A. REMAX CAPITOL PROPERTIES		Date of Disbursement 07 08 2014
Mailing Address 4000 CENTRAL AVE.		Amount of Each Disbursement this Period 900 00
City CHEYENNE WY	State WY Zip Code 82001	
Purpose of Disbursement CAMPAIGN OFFICE RENTAL	Candidate Name CHARLIE HARDY Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WY District:		

Full Name (Last, First, Middle Initial) B. REMAX CAPITOL PROPERTIES		Date of Disbursement 07 08 2014
Mailing Address 4000 CENTRAL AVE.		Amount of Each Disbursement this Period 1100 00
City CHEYENNE WY	State WY Zip Code 82001	
Purpose of Disbursement CAMPAIGN STAFF APT. RENTAL	Candidate Name CHARLIE HARDY Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WY District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000 00
TOTAL This Period (last page this line number only).....	5270 92

15020093284

**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

Mailing Address
PO BOX 1951

Election:
 Primary
 General
Other (specify)

City State ZIP Code
CHEYENNE WY 82003-1951

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

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
VARIOUS		NO DUE DATE	000 % (apr)	<input checked="" type="checkbox"/> Yes <input 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.

15020093285

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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS Date Incurred Date Due Interest Rate Secured:
02 05 2014 "NO DUE DATE" 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:
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.

15020093286

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 15 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 9500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 9500.00
---	---	---

TERMS

Date Incurred 02/14/2014	Date Due NO DUE DATE	Interest Rate 0.00% (apr)	Secured: <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)... **9500.00**

TOTALS This Period (last page in this line only)... **9500.00**

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

15020093287

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 State ZIP Code
CHEYENNE WY 82003-1951

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250.00	0.00	250.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	04 04 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.

15020093288

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 7 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
3,500.00	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 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093289

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 8 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
1,500.00	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 9, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093290

**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
900.00	000	900.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	04 25 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.

15020093291

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
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.

15020093292

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 21 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
1,000.00	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.

15020093293

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
3,400.00	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 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020093294

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
350.00	0.00	350.00

TERMS	Date Incurred	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.

15020093295

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 24 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 2,500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2,500.00
--	---	--

TERMS

Date Incurred 06 27 2014	Date Due NO DUE DATE	Interest Rate 0.00 % (apr)	Secured: <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.

15020093296

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 SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RAW IMAGE		Nature of Debt (Purpose): CAMPAIGN VIDEOS AND WEB SITE DEVELOPMENT
Mailing Address 525 HAMPTON LANE		
City	State Zip Code KEY BISCANE, FL 33149	
Outstanding Balance Beginning This Period 2462 09		
Amount Incurred This Period 0 0 0	Payment This Period 0 0 0	Outstanding Balance at Close of This Period 2462 09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CITICARDS		Nature of Debt (Purpose): CREDIT CARD DEBT
Mailing Address BOX 6500		
City	State Zip Code SIoux FALLS, SD 57117	
Outstanding Balance Beginning This Period 1450 51		
Amount Incurred This Period 0 0 0	Payment This Period 0 0 0	Outstanding Balance at Close of This Period 1450 51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMEX		Nature of Debt (Purpose): CREDIT CARD DEBT
Mailing Address PO BOX 297812		
City	State Zip Code FT. LAUDERDALE FL 33329-7812	
Outstanding Balance Beginning This Period 9504 07		
Amount Incurred This Period 1270 91	Payment This Period 233 00	Outstanding Balance at Close of This Period 10 541 98

1) SUBTOTALS This Period This Page (optional)	▶	
2) TOTALS This Period (last page this line number only)	▶	14 454 58
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	29 209 41
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		43 663 99

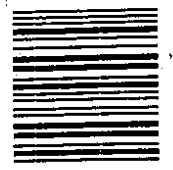
15020093297

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

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt

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Postmark

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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

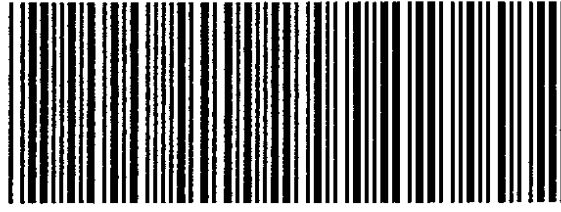
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FAX _____
Date of Receipt

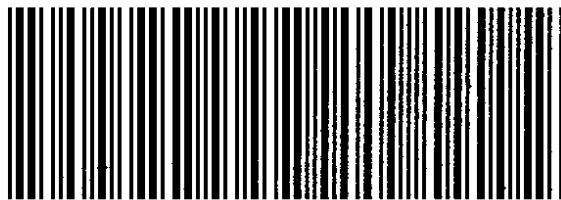
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 2/5/15

15020093299



SEN PATCH



SEN PATCH

15020093300

1