

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P. O. BOX 160
 Check if different than previously reported. (ACC) Sullivans Island SC 29482-0160

2. **FEC IDENTIFICATION NUMBER** C C00285254 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT
SC SC

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 11 / 04 / 2014 in the State of SC
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 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 Marie DuPree
Signature of Treasurer Marie DuPree [Electronically Filed] Date 02 / 18 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
SANFORD FOR CONGRESS

Report Covering the Period: From: / / To: / /

	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))....	24575.00	465915.89
(b) Total Contribution Refunds (from Line 20(d))	0.00	2400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	24575.00	463515.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3988.98	177353.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	5.49	264.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3983.49	177089.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	435954.87	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

SANFORD FOR CONGRESS

Report Covering the Period: From: / / To: / /

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).....	19500.00	272455.00
(ii) Unitemized.....	75.00	22081.01
(iii) TOTAL of contributions from individuals ▶	19575.00	294536.01
(b) Political Party Committees.....	0.00	5750.00
(c) Other Political Committees (such as PACs).....	5000.00	165629.88
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	24575.00	465915.89
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	3150.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	5.49	264.06
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	612.48
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	24580.49	469942.43

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3988.98	177353.95
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	712.22
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	2400.00
(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	2400.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3988.98	180466.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	415363.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24580.49
25. SUBTOTAL (add Line 23 and Line 24).....	439943.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3988.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	435954.87

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Form/Schedule:
Transaction ID:

**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 15
	<input checked="" 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)
SANFORD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Douglas Smith

Mailing Address 1146 Crestbrook Drive

City Charlotte State NC Zip Code 28211-4020

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

Name of Employer physician Occupation self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : AF6757A091FAA4331815

Amount of Each Receipt this Period
 _____ 2600.00

B. Full Name (Last, First, Middle Initial)
Ms. Sarah Fox

Mailing Address 3207 Eastover Ridge Drive

City Charlotte State NC Zip Code 28211-1464

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 13 / 2014

Transaction ID : A0BC125C03CE2482A8AE

Amount of Each Receipt this Period
 _____ 2600.00

C. Full Name (Last, First, Middle Initial)
Mr. Edmond Brown

Mailing Address 622 Harbor Creek Place

City Charleston State SC Zip Code 29412-3203

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : AEADDB453494B4E3B975

Amount of Each Receipt this Period
 _____ 2600.00

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

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

_____ 7800.00

**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 7 OF 15
	<input checked="" 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)
SANFORD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. William DaCol

Mailing Address 2526 B South Arlington Mill Drive

City State Zip Code
Arlington VA 22206-4035

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

Name of Employer Occupation
Potomac Communications Strategies Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2014

Transaction ID : ACD442839E3EC42D5B6C

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Mark Fox

Mailing Address 3207 Eastover Ridge Drive #522

City State Zip Code
Charlotte NC 28211-1474

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : A9093FD13568A46DD800

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Ms. Gloria G Smith

Mailing Address 1146 Crestbrook Drive

City State Zip Code
Charlotte NC 28211-4020

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

Name of Employer Occupation
None Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2014

Transaction ID : AF21017CA234943C3A84

Amount of Each Receipt this Period
2600.00

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

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

6200.00

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

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

FOR LINE NUMBER: PAGE 8 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SANFORD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Gloria G Smith

Mailing Address 1146 Crestbrook Drive

City State Zip Code
Charlotte NC 28211-4020

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2014

Transaction ID : ABD2B3F12130C4B199A5

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Dr. Douglas Smith

Mailing Address 1146 Crestbrook Drive

City State Zip Code
Charlotte NC 28211-4020

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

Name of Employer Occupation
physician self

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 13 2014

Transaction ID : A97EAF3BD49B54A3CB41

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter A. Justesen

Mailing Address 511 B 30th Avenue, North

City State Zip Code
Myrtle Beach SC 29577-2901

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 14 2014

Transaction ID : A178325E46B194CD9BB1

Amount of Each Receipt this Period
250.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SANFORD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Anthony Ross

Mailing Address Post Office Box 1149

City State Zip Code
Johns Island SC 29457-1149

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

Name of Employer Occupation
Self Chiropractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A640D1F55593445D485D

Amount of Each Receipt this Period
50.00

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

50.00

19500.00

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

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NAME OF COMMITTEE (In Full)
SANFORD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address 1101 17th St NW
No. 600

City Washington State DC Zip Code 20036-4704

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A0CAC81B07D92455EBA8

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Alcoa Inc Employees Voluntary PAC

Mailing Address 390 Park Avenue
12th Fl

City New York State NY Zip Code 10022-4608

FEC ID number of contributing federal political committee. **C C00501106**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A75C236DD3A7A4598B81

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Verizon Communications Inc/Verizon Wireless Good Government Club

Mailing Address 1300 I Street NW
Suite 400 West

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A19264DBFE8024C0CB1D

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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NAME OF COMMITTEE (In Full)
SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial) HOLCIM PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 201 Jones Road		Transaction ID : A99254BF12418483BB5D	
City Waltham	State MA	Zip Code 02451-1600	
FEC ID number of contributing federal political committee. C C00213348		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) AT&T Inc Federal PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 208 S Akard Street Suite 2701		Transaction ID : AECCBEECF7B841958E9	
City Dallas	State TX	Zip Code 75202-4206	
FEC ID number of contributing federal political committee. C C00109017		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	5000.00

**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 15			
	<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)
SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Georgia Brown's Restaurant			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 950 15th Street, NW			Amount of Each Disbursement this Period 990.00 Transaction ID : B8B31990328EA488E8C1
City Washington	State DC	Zip Code 20005-2501	
Purpose of Disbursement Event Food and Beverage		Category/ Type	
Candidate Name			
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. AT&T			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address P.O. Box 537104			Amount of Each Disbursement this Period 54.87 Transaction ID : B7DAE255379A54B8AB6B
City Atlanta	State GA	Zip Code 30353-7104	
Purpose of Disbursement Telephone		Category/ Type	
Candidate Name			
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. Georgia Brown's Restaurant			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 950 15th Street, NW			Amount of Each Disbursement this Period 300.00 Transaction ID : B7912DFE3A96D449C9EB
City Washington	State DC	Zip Code 20005-2501	
Purpose of Disbursement Event Food and Beverage		Category/ Type	
Candidate Name			
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).....	1344.87
TOTAL This Period (last page this line number only).....	

**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 13 OF 15		
	<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)
SANFORD FOR CONGRESS

A. Rally / Piryx

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2014

Amount of Each Disbursement this Period: 4.50

Transaction ID : B8BEDFEE6948348F098C

B. Hammond & Associates

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 368

City Falls Church State VA Zip Code 22040-0368

Purpose of Disbursement Fundraising consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : B4D12DED519B846B491D

c. Hammond & Associates

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 368

City Falls Church State VA Zip Code 22040-0368

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2014

Amount of Each Disbursement this Period: 10.00

Transaction ID : BFD8D112687B1479588A

SUBTOTAL of Disbursements This Page (optional)..... 2514.50

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

**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 14 OF 15			
	<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)
SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address P. O. Box 25118		Amount of Each Disbursement this Period 10.00 Transaction ID : B12B348BE009F487895A
City Tampa	State FL Zip Code 33622-5118	
Purpose of Disbursement Bank charges	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Rally / Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 144 2nd St.		Amount of Each Disbursement this Period 4.50 Transaction ID : B413DC04CF44A4BA8B24
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Fee	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 106.11 Transaction ID : B3C23DA5653B74AF586C
City Dallas	State TX Zip Code 75266-0108	
Purpose of Disbursement Telephone	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	120.61
TOTAL This Period (last page this line number only).....	

**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 15 OF 15			
	<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)
SANFORD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rally / Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 144 2nd St.		Amount of Each Disbursement this Period 9.00
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Fee	Candidate Name	Transaction ID : B3A124420B9B14C4EA10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	3988.98