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FEC  
FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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

Pressler for Senate

ADDRESS (number and street)

3101 W 41st St

Suite 210

Check if different than previously reported. (ACC)

Sioux Falls

SD

57105-8101

2. FEC IDENTIFICATION NUMBER

C C00554519

CITY

STATE

ZIP CODE

STATE DISTRICT

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

SD

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 05 15 2014 through 06 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 Mr. Colin Patrick O'Neal

Signature of Treasurer *Larry Pressler*  
Mr. Colin Patrick O'Neal

Signature of Candidate *Colin O'Neal* Date 07 01 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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FEC FORM 3  
(Revised 02/2003)

14020461278

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 20

Write or Type Committee Name  
**Pressler for Senate**

Report Covering the Period: From: <sup>M</sup>05 <sup>D</sup>15 <sup>Y</sup>2014 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>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))...	35139.60	52919.60
(b) Total Contribution Refunds (from Line 20(d))...	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	35139.60	52919.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)...	6698.26	50549.79
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	6698.26	50549.79
8. Cash on Hand at Close of Reporting Period (from Line 27)...	57248.55	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)...	55364.89	

**For further information contact:**

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

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

14020461279

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 20

Write or Type Committee Name

**Pressler for Senate**

Report Covering the Period: From: <sup>M M</sup> 05 <sup>D D</sup> 15 <sup>Y Y</sup> 2014 To: <sup>M M</sup> 06 <sup>D D</sup> 30 <sup>Y Y</sup> 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)...	30992.00	43667.00
(ii) Unitemized .....	850.00	3955.00
(iii) TOTAL of contributions from individuals ..	31842.00	47622.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	3297.60	3297.60
(d) The Candidate .....	0.00	2000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35139.60	52919.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	54873.61
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	54873.61
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ...	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	1.49	5.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	35141.09	107798.34

14020461280

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	6698.26	50549.79
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	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(c) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6698.26	50549.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	28805.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	35141.09
25. SUBTOTAL (add Line 23 and Line 24) ...	63946.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	6698.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	57248.55

**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 5 OF 20

<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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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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>A. Gregg Brockway</b>		Date of Receipt M M D D Y Y 06 10 2014	
Mailing Address 2699 Filbert St		Transaction ID : SA11AI.4507	
City San Francisco	State CA	Zip Code 94123	Amount of Each Receipt this Period 2392.00
FEC ID number of contributing federal political committee. C		Check Contribution	
Name of Employer The Centrist Project	Occupation Chairman	Election Cycle-to-Date 2392.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 500.00	
Full Name (Last, First, Middle Initial) <b>B. Richard Chow</b>		Date of Receipt M M D D Y Y 06 06 2014	
Mailing Address 3845 Washington Street		Transaction ID : SA11AI.4495	
City San Francisco	State CA	Zip Code 94118	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Check contribution	
Name of Employer TSC	Occupation Business	Election Cycle-to-Date 500.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 250.00	
Full Name (Last, First, Middle Initial) <b>C. Ian Devine</b>		Date of Receipt M M D D Y Y 06 12 2014	
Mailing Address 55 72nd St		Transaction ID : SA11AI.4518	
City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Paypal Online Contribution	
Name of Employer Devine Partners, LLC	Occupation Consultant	Election Cycle-to-Date 250.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		SUBTOTAL of Receipts This Page (optional) ..... 3142.00	
TOTAL This Period (last page this line number only) .....		3142.00	

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**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 20

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

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NAME OF COMMITTEE (In Full)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>Jerome Dodson</b>		Date of Receipt M M D D Y Y <b>05 28 2014</b>
Mailing Address <b>338 Spear Street Suite# 39-B</b>		Transaction ID : <b>SA11AI.4447</b>
City <b>San Francisco</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer <b>Parnassus Fund</b>	Occupation <b>CEO</b>	Check Contribution - CA Fundraiser
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

Full Name (Last, First, Middle Initial) <b>Jerome Dodson</b>		Date of Receipt M M D D Y Y <b>06 06 2014</b>
Mailing Address <b>338 Spear Street Suite# 39-B</b>		Transaction ID : <b>SA11AI.4480</b>
City <b>San Francisco</b>	State <b>CA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer <b>Parnassus Fund</b>	Occupation <b>CEO</b>	Check Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5200.00</b>	

Full Name (Last, First, Middle Initial) <b>April Hoxie Foley</b>		Date of Receipt M M D D Y Y <b>06 09 2014</b>
Mailing Address <b>45 Smith Ridge Rd</b>		Transaction ID : <b>SA11AI.4499</b>
City <b>South Salem</b>	State <b>NY</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Retired</b>	Occupation <b>US Ambassador/Businesswoman</b>	Check contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 7 OF 20

<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>Mr. Leonard A. Gail</b>		Date of Receipt 05 28 2014	
Mailing Address <b>440 W Belden Ave</b>		Transaction ID : <b>SA11AI.4460</b>	
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60614-3816</b>	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. <b>C</b>		Check contribution	
Name of Employer <b>Massey + Gail</b>	Occupation <b>Attorney</b>	Election Cycle-to-Date 2600.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 500.00	
Full Name (Last, First, Middle Initial) <b>Carol A. Garrick</b>		Date of Receipt 05 28 2014	
Mailing Address <b>1022 Miramar St.</b>		Transaction ID : <b>SA11AI.4468</b>	
City <b>Laguna Beach</b>	State <b>CA</b>	Zip Code <b>92651</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		Check contribution	
Name of Employer <b>Retired</b>	Occupation <b>Teacher</b>	Election Cycle-to-Date 500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 300.00	
Full Name (Last, First, Middle Initial) <b>Elizabeth L. Gladden</b>		Date of Receipt 06 14 2014	
Mailing Address <b>766D Arborview Dr</b>		Transaction ID : <b>SA11AI.4604</b>	
City <b>Charlott Hall</b>	State <b>MD</b>	Zip Code <b>20622</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>		Check Contribution	
Name of Employer <b>AFSCM</b>	Occupation <b>Operations Technician</b>	Election Cycle-to-Date 300.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....		3400.00	

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**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 8 OF 20	
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>Mark Jacobsen</b>		Date of Receipt 06 10 2014	
Mailing Address 17010 Jennifer Drive		Transaction ID : SA11AI.4505	
City Occidental	State CA	Zip Code 95465	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Check contribution	
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 500.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mr. Robert H. Koenig</b>		Date of Receipt 06 06 2014	
Mailing Address 2209 West 5th St		Transaction ID : SA11AI.4491	
City Sioux Falls	State SD	Zip Code 57104	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Check contribution	
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1000.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Richard A. Lapping</b>		Date of Receipt 06 06 2014	
Mailing Address 149 - 11th Ave		Transaction ID : SA11AI.4483	
City San Francisco	State CA	Zip Code 94118-1106	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Check Contribution	
Name of Employer Self	Occupation Attorney	Election Cycle-to-Date 250.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020461285



**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 9 OF 20	
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>John L. Loeb Jr.</b>		Date of Receipt M M D D Y Y <b>05 28 2014</b>
Mailing Address <b>50 Broad Street Suite 1137</b>		<b>Transaction ID : SA11AJ.4462</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10004</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Retired</b>	Occupation <b>US Ambassador</b>	Check contribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>James E. Moore</b>		Date of Receipt M M D D Y Y <b>06 06 2014</b>
Mailing Address <b>4900 S. Oxbow Ave. No. 301</b>		<b>Transaction ID : SA11AI.4488</b>
City <b>Sioux Falls</b>	State <b>SD</b>	Zip Code <b>57106</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Retired</b>	Occupation <b>Attorney</b>	Check Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>John North</b>		Date of Receipt M M D D Y Y <b>06 09 2014</b>
Mailing Address <b>PO Box 774</b>		<b>Transaction ID : SA11AI.4504</b>
City <b>Huron</b>	State <b>SD</b>	Zip Code <b>57350-0774</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Check contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020461286

**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 20	
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>Mr. William A. Obenshain</b>		Date of Receipt M M D D Y Y 05 28 2014
Mailing Address <b>2236 N. Lincoln Park West</b>		Transaction ID : <b>SA11AL4451</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60614</b>		Amount of Each Receipt this Period <b>2600.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Check Contribution - Chicago
Name of Employer <b>DePaul University</b>	Occupation <b>Education</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

Full Name (Last, First, Middle Initial) <b>Mr. David R Peeler</b>		Date of Receipt M M D D Y Y 05 28 2014
Mailing Address <b>15 Buckingham St</b>		Transaction ID : <b>SA11AI.4448</b>
City <b>Cambridge</b>	State <b>MA</b>	
Zip Code <b>02138</b>		Amount of Each Receipt this Period <b>2600.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Check Contribution
Name of Employer <b>Berkshire Partners</b>	Occupation <b>Finance</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

Full Name (Last, First, Middle Initial) <b>Richard Peters</b>		Date of Receipt M M D D Y Y 06 12 2014
Mailing Address <b>211 East 70th St Ste 11G</b>		Transaction ID : <b>SA11AI.4516</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10021</b>		Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Paypal Online Contribution
Name of Employer <b>Self</b>	Occupation <b>CPA</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020461287

**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 20	
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial) <b>George Petrides</b>		Date of Receipt M M O O Y Y 06 12 2014	
Mailing Address <b>900 Park Avenue</b> <b>21A</b>		<b>Transaction ID : SA11AI.4522</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10075</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Paypal Online Contribution	
Name of Employer <b>Self</b>	Occupation <b>Investments</b>	Election Cycle-to-Date <b>250.00</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Theodore S. Proxmire</b>		Date of Receipt M M O O Y Y 06 06 2014	
Mailing Address <b>4519 Wetherill Rd</b>		<b>Transaction ID : SA11AI.4497</b>	
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20816-1836</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Check Contribution	
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Shawn R. Reigsecker</b>		Date of Receipt M M O O Y Y 06 10 2014	
Mailing Address <b>208 W Washington St</b> <b>Apt 1813</b>		<b>Transaction ID : SA11AI.4511</b>	
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60606</b>	Amount of Each Receipt this Period <b>2000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		Check Contribution	
Name of Employer <b>Centro</b>	Occupation <b>CEO</b>	Election Cycle-to-Date <b>2000.00</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020461288

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

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

FOR LINE NUMBER: PAGE 12 OF 20

(check only one)

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

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NAME OF COMMITTEE (in Full)  
**Pressler for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kevin J. Rochford**

Mailing Address **1440 N. Lake Shore Dr.**  
**23E**

City **Chicago** State **IL** Zip Code **60610**

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

Name of Employer **Bessemer Trust** Occupation **Wealth Management**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
M M D D Y Y  
**05 28 2014**

Transaction ID : **SA11AI.4445**

Amount of Each Receipt this Period  
**350.00**

Check Contribution

**B.** Full Name (Last, First, Middle Initial)  
**David M. Slosberg**

Mailing Address **PO Box 4484**

City **Burlingame** State **CA** Zip Code **94011-4484**

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

Name of Employer **Self - Independent Contractor** Occupation **Accountant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M D D Y Y  
**05 28 2014**

Transaction ID : **SA11AI.4466**

Amount of Each Receipt this Period  
**1000.00**

Check Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Anne W. Van Rensselaer**

Mailing Address **575 Park Ave**  
**#1201**

City **New York** State **NY** Zip Code **10021**

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

Name of Employer **Retired** Occupation **Editor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M D D Y Y  
**05 28 2014**

Transaction ID : **SA11AI.4464**

Amount of Each Receipt this Period  
**1000.00**

Check contribution

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

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

**2350.00**

14020461289

**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 13 OF 20	
<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial)  
**Mr. Charles J. Wheelan**

Mailing Address **9 Crowley Terrace**

City <b>Hanover</b>	State <b>NH</b>	Zip Code <b>03755</b>
------------------------	--------------------	--------------------------

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

Name of Employer <b>Dartmouth College</b>	Occupation <b>Professor</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date <b>1000.00</b>
--

Date of Receipt  
M M D D Y Y  
**05 28 2014**

Transaction ID : SA11A1.4454

Amount of Each Receipt this Period  
**1000.00**

Check contribution

Full Name (Last, First, Middle Initial)  
**Dale Timothy White**

Mailing Address **603 Skyline Drive**

City <b>Cody</b>	State <b>WY</b>	Zip Code <b>82414</b>
---------------------	--------------------	--------------------------

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

Name of Employer <b>Self</b>	Occupation <b>Media Production</b>
---------------------------------	---------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date <b>250.00</b>
---

Date of Receipt  
M M D D Y Y  
**06 13 2014**

Transaction ID : SA11A1.4590

Amount of Each Receipt this Period  
**250.00**

Online paypal contribution

Full Name (Last, First, Middle Initial)  
**Colston E. Young**

Mailing Address **260 King Street  
Apt. 1109**

City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94107</b>
------------------------------	--------------------	--------------------------

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

Name of Employer <b>SAP Ventures</b>	Occupation <b>Operations</b>
---	---------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date <b>2600.00</b>
--

Date of Receipt  
M M D D Y Y  
**06 06 2014**

Transaction ID : SA11A1.4481

Amount of Each Receipt this Period  
**2600.00**

Check Contribution

SUBTOTAL of Receipts This Page (optional).....	<b>3850.00</b>
--	----------------

TOTAL This Period (last page this line number only).....	<b>30992.00</b>
--	-----------------

14020461290

**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 14 OF 20

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

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NAME OF COMMITTEE (In Full)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial)

**CENTRIST PROJECT VOICE; THE**

**A.** Mailing Address **9 CROWLEY TERRACE**

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing federal political committee. **C C00563437**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**655.00**

Date of Receipt  
M M D D Y Y  
**06 06 2014**

Transaction ID : SA11C.4493

Amount of Each Receipt this Period  
**655.00**

Check contribution - bundled

Full Name (Last, First, Middle Initial)

**B.** **CENTRIST PROJECT VOICE; THE**

Mailing Address **9 CROWLEY TERRACE**

City	State	Zip Code
HANOVER	NH	03755

FEC ID number of contributing federal political committee. **C C00563437**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3297.60**

Date of Receipt  
M M D D Y Y  
**06 10 2014**

Transaction ID : SA11C.4510

Amount of Each Receipt this Period  
**2642.60**

Check Contribution

Full Name (Last, First, Middle Initial)

**C.** 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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... **3297.60**

**TOTAL** This Period (last page this line number only)..... **3297.60**

14020461291

**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 20

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

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NAME OF COMMITTEE (In Full)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial)

**A. Butzel Long**

Mailing Address **150 West Jefferson  
Suite 100**

City **Detroit** State **MI** Zip Code **48226**

Purpose of Disbursement  
**Legal Services**

Candidate Name  
**Pressler for Senate**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: **SD** District:

Date of Disbursement

M M D D Y Y  
**06 23 2014**

Amount of Each Disbursement this Period

**1845.00**

Transaction ID : **SB17.4807**

**B. Canfield Business Interiors**

Mailing Address **402 W 9th St**

City **Sioux Falls** State **SD** Zip Code **57104**

Purpose of Disbursement  
**Office Furniture Lease**

Candidate Name  
**Pressler for Senate**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: **SD** District:

Date of Disbursement

M M D D Y Y  
**05 28 2014**

Amount of Each Disbursement this Period

**402.80**

Transaction ID : **SB17.4475**

**C. Craig Computer Services**

Mailing Address **PO Box 90432**

City **Sioux Falls** State **SD** Zip Code **57109**

Purpose of Disbursement  
**Tech Support**

Candidate Name  
**Pressler for Senate**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: **SD** District:

Date of Disbursement

M M D D Y Y  
**06 26 2014**

Amount of Each Disbursement this Period

**106.00**

Transaction ID : **SB17.4809**

**SUBTOTAL** of Disbursements This Page (optional)..... **2353.80**

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

14020461292

**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 16 OF 20			
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial)  
**A. Michael Doan**

Mailing Address 3316 N 21st Ave

City Arlington State VA Zip Code 22207

Purpose of Disbursement Facebook ad campaign expenses

Candidate Name Pressler for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: SD District:

Date of Disbursement 05 28 2014

Amount of Each Disbursement this Period 260.12

Transaction ID : SB17.4474

Full Name (Last, First, Middle Initial)  
**B. Koch Company Park Place**

Mailing Address 3101 West 41st St

City Sioux Falls State SD Zip Code 57105

Purpose of Disbursement Campaign Office Rent

Candidate Name Pressler for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: SD District:

Date of Disbursement 06 24 2014

Amount of Each Disbursement this Period 3125.00

Transaction ID : SB17.4608

Full Name (Last, First, Middle Initial)  
**C. Liberty Mutual Insurance**

Mailing Address 9450 Seward Road

City Fairfield State OH Zip Code 45014-5456

Purpose of Disbursement Business Insurance Policy

Candidate Name Pressler for Senate

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: SD District:

Date of Disbursement 05 21 2014

Amount of Each Disbursement this Period 500.00

Transaction ID : SB17.4442

**SUBTOTAL** of Disbursements This Page (optional)..... 3885.12

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

14020461293



**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 17 OF 20	
	<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)  
**Pressler for Senate**

Full Name (Last, First, Middle Initial)

**A. Midcontinent Business Solutions**

Date of Disbursement

Mailing Address PO Box 5010

M M D D Y Y  
06 02 2014

City State Zip Code  
Sioux Falls SD 57117

Amount of Each Disbursement this Period

Purpose of Disbursement  
Internet and Phone Setup/Fees

267.48

Candidate Name  
Pressler for Senate

Category/  
Type

Transaction ID : SB17.4478

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  
 Other (specify)

State: SD District:

**B.**

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:

**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)..... 267.48

**TOTAL** This Period (last page this line number only)..... 6506.40

14020461294

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

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

PAGE 18 OF 20

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full) **Pressler for Senate** Transaction ID : **SC/10.4103**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **LARRY PRESSLER** *(PERSONAL FUNDS)* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 5105 S ROLLING GREEN AVE SUITE 209

City State ZIP Code  
 SIOUX FALLS SD 57108

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
12 <sup>24</sup> 2013	December, 2014	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)..... ▶ 25000.00

**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.

14020461295

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

PAGE 19 OF 20

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)  
**Pressler for Senate**

Transaction ID : SC/10.4198

LOAN SOURCE Full Name (Last, First, Middle Initial)

**LARRY PRESSLER**

[PERSONAL FUNDS]

Election: 2014

Primary

General

Other (specify) ▼

Mailing Address  
5105 S ROLLING GREEN AVE SUITE 209

City State ZIP Code  
SIOUX FALLS SD 57108

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
29873.61	0.00	29873.61

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
02 <sup>nd</sup> 20 <sup>th</sup> 2014	December 2014	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)..... ▶ 29873.61

TOTALS This Period (last page in this line only) ... ▶ 54873.61

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

14020461296

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 20 OF 20

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

Pressler for Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LARRY PRESSLER

Nature of Debt (Purpose):  
Credit Card Surplus Applied to Campaign Expenses

Mailing Address 5105 S ROLLING GREEN AVE SUITE 209

City State Zip Code  
SIOUX FALLS SD 57108

Outstanding Balance Beginning This Period  
491.28

Transaction ID : SD10.4302

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 0.00 491.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...	▶	491.28
2) TOTALS This Period (last page this line number only) ...	▶	491.28
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	▶	54873.61
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		55364.89

14020461297

JANCY ERICKSON  
SECRETARY

NA C. MCCALLUM  
SUPERINTENDENT  
MAIL OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-71  
PHONE (202) 224-0222

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

Date of Receipt

**7-15-14**

USPS FIRST CLASS MAIL

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

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

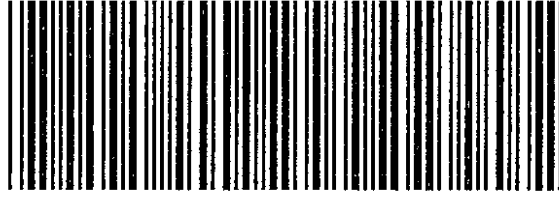
PREPARER

**DH**

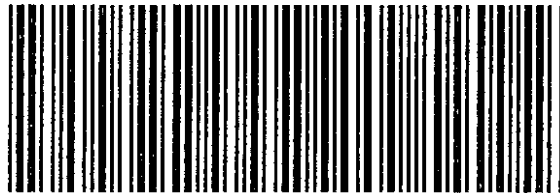
DATE PREPARED

**7-15-14**

14020461298



SEN PATCH



SEN PATCH

14020461299