

SECRETARY OF THE SENATE
15 JUN -5 PM 12:38

Office Use Only

**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**
BELL FOR SENATE

ADDRESS (number and street) **PO BOX 31**
Check if different than previously reported. (ACC) **PALISADES PARK** **NJ** **07650**

2. **FEC IDENTIFICATION NUMBER** **C** **C00558122**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
NJ **00**

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 **M M** in the State of
(c) 30-Day **POST**-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on **M** in the State of

5. Covering Period **11** **25** / **2014** through **12** **31** **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 **Alfred A Angelo**
Signature of Treasurer **Alfred A Angelo** Date

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 **FEC FORM 3**
(Revised 02/2003)

15020173280

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From: ^{M M} 11 ^{D D} 25 ^{Y Y} 2014 To: ^{M M} 12 ^{D D} 31 ^{Y Y} 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)) ..	350.00	563122.38
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ..	350.00	562922.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	5375.05	512834.93
(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)) ..	5375.05	512834.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	2182.74	
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) ..	22027.63	

For further information contact:

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

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

15020173281

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From: M M D D Y Y 11 25 2014 To: M M D D Y Y 12 31 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) ...	250.00	415224.93
(ii) Unitemized	100.00	79172.45
(iii) TOTAL of contributions from individuals	350.00	494397.38
(b) Political Party Committees...	0.00	2000.00
(c) Other Political Committees (such as PACs) ...	0.00	66725.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	350.00	563122.38
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	30000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	30000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...		
	350.00	593122.51

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	5375.05	512834.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	500.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	30000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	30000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	200.00
(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	200.00
21. OTHER DISBURSEMENTS ..	0.00	1636.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5875.05	544671.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	7707.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	350.00
25. SUBTOTAL (add Line 23 and Line 24)...	8057.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	5875.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2182.74

15020173283

**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 12	
	<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

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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) David Gosselin		Date of Receipt M M / D D Y Y 12 15 2014	
A. Mailing Address 62 Jordan Rd		Transaction ID : SA11AI.8170	
City Willimantic	State CT	Zip Code 06226	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Insurance Sales		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D Y Y Y Y	
B. Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial)		Date of Receipt M M	
C. Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
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).....	250.00
TOTAL This Period (last page this line number only).....	250.00

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**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Julia Bell		Date of Disbursement M M D D Y Y Y 11 26 2014	
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 406.44	
City Leonia	State NJ	Zip Code 07605	Transaction ID : SB17.8175
Purpose of Disbursement Expense Reimbursement		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

Full Name (Last, First, Middle Initial) B. Julia Bell		Date of Disbursement M M D D Y Y Y 12 01 2014	
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 271.60	
City Leonia	State NJ	Zip Code 07605	Transaction ID : SB17.8175.1 [MEMO ITEM]
Purpose of Disbursement Mileage		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement M M D D Y Y Y 12 01 2014	
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 566.46	
City Charlotte	State NC	Zip Code 28272	Transaction ID : SB17.8193
Purpose of Disbursement Credit Card Payment		Category/ Type 009	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00		

SUBTOTAL of Disbursements This Page (optional).....	972.90
TOTAL This Period (last page this line number only).....	

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**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 7 OF 12	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Capital One		Date of Disbursement M M / D D / Y Y Y 12 / 01 / 2014	
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 433.54	
City Charlotte	State NC	Zip Code 28272	Transaction ID : SB17.8194
Purpose of Disbursement Credit Card Payment		Category/ Type 009	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ District: 00			

Full Name (Last, First, Middle Initial) B. Gia Coluccio		Date of Disbursement M M / D D / Y Y Y 12 / 01 / 2014	
Mailing Address 310 Prospect Ave Apt. 331		Amount of Each Disbursement this Period 3000.00	
City Hackensack	State NJ	Zip Code 07601	Transaction ID : SB17.8186
Purpose of Disbursement Campaign Consulting		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ District: 00			

Full Name (Last, First, Middle Initial) C. Constant Contact		Date of Disbursement M M / D D / Y Y Y 12 / 03 / 2014	
Mailing Address 17 Battery Pl		Amount of Each Disbursement this Period 180.00	
City New York	State NY	Zip Code 10004	Transaction ID : SB17.8180
Purpose of Disbursement E-Mail Marketing		Category/ Type 001	
Candidate Name BELL FOR SENATE		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ District: 00			

SUBTOTAL of Disbursements This Page (optional).....	3613.54
TOTAL This Period (last page this line number only).....	

15020173286

**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)

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17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Google

Full Name (Last, First, Middle Initial)
Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94041

Purpose of Disbursement E-Mail Services

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 12 / 05 / 2014

Amount of Each Disbursement this Period: 70.00

Transaction ID : SB17.8177

B. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Payroll

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 11 / 28 / 2014

Amount of Each Disbursement this Period: 39.95

Transaction ID : SB17.8173

C. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Accounting

Candidate Name **BELL FOR SENATE**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement: 11 / 28 / 2014

Amount of Each Disbursement this Period: 47.70

Transaction ID : SB17.8174

SUBTOTAL of Disbursements This Page (optional)..... 157.65

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

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**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 9 OF 12

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement M M D D Y Y 12 03 2014	
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 62.95 Transaction ID : SB17.8181	
City Mountain View	State CA		Zip Code 94043
Purpose of Disbursement Accounting	001 Category/ Type		
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00			

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M D D Y Y 12 29 2014	
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 39.95 Transaction ID : SB17.8182	
City Mountain View	State CA		Zip Code 94043
Purpose of Disbursement Payroll	001 Category/ Type		
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00			

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement M M D D Y Y 12 29 2014	
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 44.70 Transaction ID : SB17.8183	
City Mountain View	State CA		Zip Code 94043
Purpose of Disbursement Accounting	001 Category/ Type		
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00			

SUBTOTAL of Disbursements This Page (optional)..... 147.60

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

15020173288

**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 12	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. TCD Compliance, LLC			Date of Disbursement M M / D D , Y Y Y Y 12 / 22 / 2014	
Mailing Address 3365 Cherry Lane Unit D			Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.8176	
City Woodbury	State MN	Zip Code 55129		
Purpose of Disbursement Accounting and Reporting		Category/ Type 001		
Candidate Name BELL FOR SENATE		Disbursement For: 2014		
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District: 00			

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

SUBTOTAL of Disbursements This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	5091.69

15020173289

**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)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. PEZZULLO FOR SENATOR

Mailing Address PO BOX 7043

Date of Disbursement

M M / D D Y Y
12 30 2014

City FREEHOLD State NJ Zip Code 07728

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Campaign Contribution

011

Transaction ID : SB18.8184

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

B.

Mailing Address

Date of Disbursement

M / D D

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify)

State: District:

C.

Mailing Address

Date of Disbursement

M

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

15020173290

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital One	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 71083	
City State Zip Code Charlotte NC 28272	

Outstanding Balance Beginning This Period	Transaction ID : SD10.5743	
14993.33		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	433.54	14559.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital One	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 71083	
City State Zip Code Charlotte NC 28272	

Outstanding Balance Beginning This Period	Transaction ID : SD10.6975	
566.46		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	566.46	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 15123	
City State Zip Code Wilmington DE 19850	

Outstanding Balance Beginning This Period	Transaction ID : SD10.8167	
7617.84		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	150.00	7467.84

1) SUBTOTALS This Period This Page (optional) ...	22027.63
2) TOTALS This Period (last page this line number only) ...	22027.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	22027.63

15020173291

Hand Delivered

15020173292

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

Date of Receipt

6-5-15

USPS FIRST CLASS MAIL

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

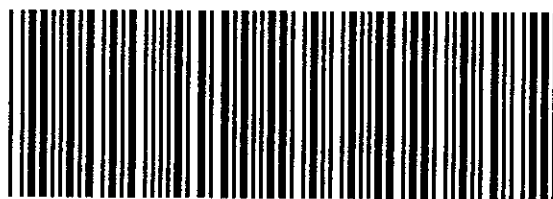
PREPARER

DH

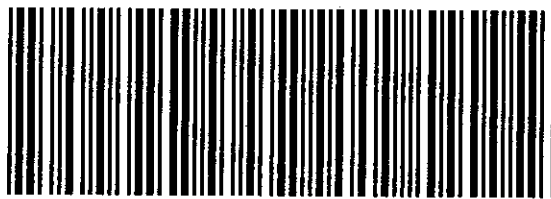
DATE PREPARED

6-5-15

15020173293



SEN PATCH



SEN PATCH

15020173294