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FORM 3

Office

Use

Only

FE5AN018

REPORT OF RECEIPTS

For An Authorized Committee

RECEIVED

2014 APR II AM 7: 30 FEC MAIL CENTER

FEC FORM 3

(Revised 02/2003)

			Office	Use Only
NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	atte Let
KEN HERRON F	DR CONGRI	<u> </u>		
				
ADDRESS (number and street)	210 WOODLA	ND DRIVE		
Check if different than previously reported. (ACC)	- ALHOUN		GA 130	7 <u>01</u> -
2. FEC IDENTIFICATION NUM	BER ▼ CITY	A	STATE A	ZIP CODE
C0056010	2 3. IS THIS REPOR		AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose	e One) (b) 12-Day	PRE-Election Report for the:		
(a) Quarterly Reports:	(b) 12-Day	P71	{ma}	
April 15 Quarterly Repo	ort (Q1)	Primary (12P) Convention (12C)	General (12G)	Runoff (12R)
July 15 Quarterly Repo			Special (12S)	
October 15 Quarterly F	Report (Q3) Election	n on (M, M) / (D, D)	/ "\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	in the State of
January 31 Year-End R	Report (YE) (c) 30-Day	POST-Election Report for the	e:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TE	R) Election		/ [• • • • • • • • • • • • • • • • • • 	in the State of
5. Covering Period TB	Minned State (1975)		true correct and com	
Type or Print Name of Treasurer	<u> </u>	a Hemon	Ray	µ1616.
Signature of Treasurer	llxandya.Hi	n Ran	Date 04' (04 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.



SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name HERRON FOR CONGRESS 03/31/2014 From: Report Covering the Period: **COLUMN A** COLUMN B This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (other than loans) (from Line 11(e)) (b) Total Contribution Refunds (from Line 20(d)) (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures Total Operating Expenditures (from Line 17) (b) Total Offsets to Operating Expenditures (from Line 14)..... (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

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

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

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)



DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

KEN HERRON FOR CONGRESS

Report Covering the Period:

From:



To:

03 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)	25000	250.00
	(ii) Unitemized	3,29900	3,29900
	(b) Political Party Committees (c) Other Political Committees (such as PACs)		
	(d) The Candidate	2,09,5,9.¥ 5,644.9.¥	2,095.94
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13.	LOANS: (a) Made or Guaranteed by the Candidate	3,800.00	3,80000
14.	(add Lines 13(a) and (b)) OFFSETS TO OPERATING EXPENDITURES	3,800	3,800
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	70-	
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	9,4,44,94	9,44494



DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	8,298.97	
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	7-0-	
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
	(b) Of All Other Loans		
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees	-0-	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	(, , , , , , , , , , , , , , , , , , ,	######################################
21.	OTHER DISBURSEMENTS	70-	production of the production of the state of
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	8,298.97	
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	rting period	-0-
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	9,444.9.4
25.	SUBTOTAL (add Line 23 and Line 24)		9,444.94
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	8,298.97
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	g Period	1,145,97



SCHEDULE A (FEC Form 3)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF (check only one)
	Detailed Summary Page	12 13a 13b 14 15
Any information copied from such Reports and Statements more for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) KEN HERRON FOR CON	CAUSS	
Ken Herron For Con Full Name (Last, First, Middle Initial) A. Full Name S. Mathews		Date of Receipt
Mailing Address P.O. By 188		63 07 2014
City Calhoun State	Zip Code 3 0703	
FEC ID number of contributing federal political committee.	ngan ingkanjulas yanti (kingkan) Kokanthe Dawid kulturather	Amount of Each Receipt this Period
Name of Employer Shark Markews INS Occupation	w Noise	<u> </u>
	ycle-to-Date ,250.0⊅	
Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address		Lagrand V Lagrand V Lagrand A
City State	Zip Code	
federal political committee		Amount of Each Receipt this Period
Name of Employer Occupation	1	The state of the s
Primary General Other (specify)	ycle-to-Date Apprend of the second of the s	
Full Name (Last, First, Middle Initial)	-	Data of Bassist
C. Mailing Address		Date of Receipt
City State	Zip Code	- the all the transfer of the second of the
federal political committee		Amount of Each Receipt this Period
Name of Employer Occupation	1	i Pastorius ero erosporius (* 1888)
Primary General Other (specify)	ycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)		And the state of t



SCHEDULE B (FEC Form 3)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate so for each categor Detailed Summa	hedule(s) y of the	FOR LINE NUMBER: PAGE OF (check only one) 17 18 19a 191 20a 20b 20c 21
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	or Conc	SP055		·
Full Name (Last, First, Middle Initial) A. STICKORS BOWNERS	Can			Date of Disbursement
Mailing Address 41 Ventupa [te 335		11 29 2013
City Duluth	State	Zip Code 30090	,	Amount of Each Disbursement this Period
Purpose of Disbursement Bumpen Stockers	S/CAR SI		DDL	, ,204.6
Candidate Name EN HELRON	,		Category/ Type	
Office Sought: House Dis Senate President	Sbursement For: Primary Other (sp	· General		
State: District: Full Name (Last, First, Middle Initial)			 	
B. INK Technolog	ries, co	~~		Date of Disbursement
Mailing Address 7600 Mc Ewen	Road			01 22 2014
Day tow	State	Zip Code 4545	9	Amount of Each Disbursement this Period
Purpose of Disbursement RINGR TONER	_		٠	20500
Candidate Name KEN HERRON			Category/ Type	203-
	sbursement For: Primary Other (sp	General ecify)		
Full Name (Last, First, Middle Initial)	^	\ \		Date of Disbursement
c. Georgia Rapubl	ICAN P	axty		M M / D D ', Y Y Y
Mailing Address				03 05 2014
City Atlanta	State Zip	Code		Amount of Each Disbursement this Period
Purpose of Disbursement QUALLET CATA	n Fee			5,220.00
Candidate Name KEN HERRON			Category/ Type	3,120.
Office Sought: House Dis	sbursement For: Primary Other (sp	General Gecify)		
SUBTOTAL of Disbursements This Page (opt	ional)			- · · · · · · · · · · · · · · · · · · ·
TOTAL This Period (last page this line number	er only)		·······	, ,

SCHEDULE B (FEC Form 3)		FOR LINE NUMBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
HEMIZED DISBURSEMENTS	Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statement	ts may not be sold or used by an	المنظم المنظم المنظم
or for commercial ourooses, other than using the name a		
NAME OF COMMITTEE (In Full)		
/ KEN HERRON FOR (ongress	
Full Name (Last, First, Middle Initial)		Data of Disk are at
A. Good Guys SIGNS		Date of Disbursement
Mailing Address E. Hillsborough	Ave	03 11 2014
City Temp A State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement UAREL 516N3	(A. 19. A.)	, ,896,31
Candidate Name LEN HERRON	Categor Type	//
Office Sought: House Disbursement		
Senate V Prin	nary · [] General er (specify)	
State: CAP District: 14		
Full Name (Last, First, Middle Initial)		
B. INKTECHNOLOGIES. LOM		Date of Disbursement
Mailing Address 7600 McEwen Road		03 11 2014
Day Ton State		Amount of Each Disbursement this Period
Purpose of Disbarsement	73731	,205.00
PRINTER TONER CARTRICIA	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Candidate Name KEN HER REN 3	Categor Type	y/"
Office Sought: House Disbursement	. 1 011	
	nary General	·
Senate Prin	provided.	·
Senate Prin	nary General	
Senate President Oth State: GA District: L4	nary General	Date of Disbursement
State: Senate President District: 14 Full Name (Last, First, Middle Initial)	nary General	M, W, 1 D D . Y Y Y
Senate President President Oth State: CA District: L4 Full Name (Last, First, Middle Initial) C. Mailing Address	nary General er (specify)	M 1 D D 1, Y Y Y
Senate President Oth State: CA District: L4 Full Name (Last, First, Middle Initial) C.	nary General	M, M, 1 D D , Y Y Y
Senate President President Oth State: CA District: L4 Full Name (Last, First, Middle Initial) C. Mailing Address	nary General er (specify)	Amount of Each Disbursement this Period
Senate President President Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	nary General er (specify) Zip Code	Amount of Each Disbursement this Period
Senate President President Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	nary General er (specify) Zip Code Categor	Amount of Each Disbursement this Period
Senate President President Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	rary General er (specify) Zip Code Categor Type	Amount of Each Disbursement this Period
Senate President President Oth State: CAP District: LAP Full Name (Last, First, Middle Initial) C. Mailing Address City State Purpose of Disbursement Candidate Name Office Sought: House Senate Disbursement Print Print Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	rary General er (specify) Zip Code Categor Type t For: nary General	Amount of Each Disbursement this Period
Senate President President Oth State: CAP District: LAP Full Name (Last, First, Middle Initial) C. Mailing Address City State Purpose of Disbursement Candidate Name Office Sought: House Senate Disbursement Print Print Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	rary General er (specify) Zip Code Categor Type	Amount of Each Disbursement this Period
Senate President President President President Oth State: Propose of Disbursement Candidate Name Office Sought: House President Print Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	rary General er (specify) Zip Code Categor Type t For: nary General	Amount of Each Disbursement this Period
Senate President President President President Oth State: Propose of Disbursement Candidate Name Office Sought: House President Print Oth Oth Oth Oth Oth Oth Oth Oth Oth Ot	rary General er (specify) Zip Code Categor Type i For: nary General er (specify)	Amount of Each Disbursement this Period
Senate President President District: 14 Full Name (Last, First, Middle Initial) C. Mailing Address City State Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate Prin President State: District:	rary General er (specify) Zip Code Categor Type t For: nary General er (specify)	Amount of Each Disbursement this Period



SCHEDULE C (FEC Form 3) LOANS

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

PAGE OF

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

	1 130
NAME OF COMMITTEE (In Full) Ken Herron Fur Cond	sness
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
	Primary
Kenneth L. Herrow, SR	General
Mailing Address	Other (specify)
210 woodland Dr	
City Calhoun State ZIP Co	· ·
CAINFUN GA 30	0701
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
3800	3,800.00
TERMS	
Date Incurred Date Due	Interest Rate Secured:
37 / BE / BX 1 1 24 / BY / B	ATE DO TO
	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	103 110
1. Full Name (Last, First, Middle Initial)	Name of Employer
Total facility (East, 1716), Missis Missis	
Mailing Address	Occupation
	<u> </u>
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount Guaranteed
City State ZIP Code	Outstanding:
O E NAL COLOR DE LA MARCHIA LESSA	
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
Walling Address	- Octobation
	Amount [[]]
City State ZIP Code	Guaranteed
,	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount Comment of the
City State ZIP Code	Guaranteed Outstanding:
	Contracting.
SUBTOTALS This Period This Page (optional)	And the state of t
	I was the state of
TOTALS This Period (last page in this line only)	in the state of th
TO THE TORSE HELD PAGE III and line of thy)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forward to appropriate line of Summarv.

OHR

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE OF
FOR LINE NUMBER:
(check only one)

xcluding Loans			pered line)	(check only one)	10
NAME OF COMMITTEE (IN Full) KEN HERRON FOR C	ON GRASS				
A. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor		Nature of D	ebt (Purpose):	
None					
Mailing Address					
City State	Zip Code				
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period		Outstandi	ng Balance at Close of	This Period
][
B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of D	ebt (Purpose):	
Mailing Address					
City State	Zip Code				
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Payment This Period		Outstandi	ng Balance at Close of	This Period
		ار ۔۔۔۔۔۔۔	ll Martina	n 95 Geedel 9 76 fact	. ***
C. Full Name (Last, First, Middle Initial) of Det	otor or Creditor		Nature of D	Pebt (Purpose):	
Mailing Address			i		
City	State Zip Code	-			
Outstanding Balance Beginning This Period	Payment This Period		Outstand	ng Balance at Close of	This Period
Amount Incurred This Period	Fayment This Felous	 	preside and		
1) SUBTOTALS This Period This Page (optional)		>			
2) TOTALS This Period (last page this line numb	er only)	>	1	n de nomeno perme da se de la como de la com La como de la como de l	
3) TOTAL OUTSTANDING LOANS from Schedul	le C (last page only)	>	li li	- F-2 - L-9 - L	

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)



SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463			
NAME OF COMMITTEE (In Full)		FEC	DENTIFICATION NUMBER
KEN HERRON FOR CONS	fress	r;	00560102
LENDING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Full Name		genega na maj	granda tuttini tutti
None	<u></u>	2	**************************************
Mailing Address	Date Incurred or Established		/ D + D / . Y . Y . Y . Y .
	——————————————————————————————————————	[- 25]	/ D' D' / Y Y Y Y
City State Zip Code	· Date Due	M C M	. li
A. Has loan been restructured? No Yes	If yes, date originally incurre	1. /	\ \(\begin{align*}{cccccccccccccccccccccccccccccccccccc
B. If line of credit,	Total	P. C.	
Amount of this Draw:	Outstanding	!!	n destina status situation (n. 1911). O destina status situation (n. 1911).
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	rred? nust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates stocks, accounts receivable, cash on deposit, or oth No Yes If yes, specify:	of deposit, chattel papers,		value of this collateral?
E. Are any future contributions dr future receipts of intercollateral for the loan? No Yes If yes,	erest income, pledged as specify:	What is the	estimated value?
A depository account must be established pursuant	Location of account:		
to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Address:		·
Date account established:			
	City, State, Zip:		
F. If neither of the types of collateral described above exceed the loan amount, state the basis upon which			
G. COMMITTEE TREASURER		DATE	
Typed Name Signature			/ DTFD / YHY Y Y
H. Attach a signed copy of the loan agreement.	· · · · · · · · · · · · · · · · · · ·		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above. II. The loan was made on terms and conditions (i similar extensions of credit to other borrowers III. This institution is aware of the requirement that complied with the requirements set forth at 11.	including interest rate) no more for comparable credit worthiness talloan must be made on a bas	avorable at to sis which ass	he time than those imposed fo ures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE	
Typed Name Signature	itle	M M	/ O + O / V Y Y Y
~		Landa de	De Contilina De San Contentino de

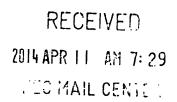


FEC FORM 3Z (File with Form 3) CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

ame of	Principal Campaign	Committee (in Full)	Report Coveri	ng Period:		
Ker	v HERRON	For Congre	From:	31/201	To: 3 03 131	1 201
		Committee I	Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
	KEN HE	RRON FOR	CONGROSS		25000	-0-
Colum	nn Total Last Page O	nly			3,299 =	
	(c) Line No. 11(c) fotal Contributions from Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	-0-	2,095 94	5,644 -	-0-	3,80000	-0-
В						
	(i)· Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(f) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
А	3,8000	-0-	-0-	9,44494	8,29897	-0-
В						
	(o) Line No. 19(a) Line No. 19(a) tal Loan Repayments of Loans Made or aranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committee
Α	-0-	-0-	-0-	70-	-0-	70-
В						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligation Owed TO the Committee
Α	-0-	-0-	8,2989	-0-	1,145 97	-0-
В						
D	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	-0-	5, 44 94	8,29897			
В				2 2 2		

14031210





Federal Election Commission agg E street NW WAShington, DC 20463





Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked JSPS First Class Mail **USPS** Registered/Certified Postmarked **USPS Priority Mail Postmarked USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(8/2013)

PREPARER