

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE Office Use Only

14 NOV 17 PM 2:08 12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

FRIENDS OF CHRIS MCDANIEL

ADDRESS (number and street)

POST OFFICE BOX 125



Check if different than previously reported. (ACC)

LAUREL MS 39441

2. FEC IDENTIFICATION NUMBER

C00550657

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

MS

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

MM / DD / YYYY

in the State of

State

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY 01 / 01 / 2014

through

MM / DD / YYYY 03 / 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 DAWN WALTERS

Signature of Treasurer DAWN WALTERS

Date

MM / DD / YYYY 11 / 10 / 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.

Table with 8 columns and 1 row for Office Use Only

FEC FORM 3 (Revised 02/2003)

1402122296

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 265

Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period: From:

M M / D D / Y Y Y Y
01 / 01 / 2014

To:

M M / D D / Y Y Y Y
03 / 31 / 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))...	474564.72	862266.72
(b) Total Contribution Refunds (from Line 20(d)) ..	2599.00	2599.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	471965.72	859667.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	321190.16	493602.53
(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))...	321190.16	493602.53
8. Cash on Hand at Close of Reporting Period (from Line 27)...	466165.19	
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)...	100100.00	

For further information contact:

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

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

1402122297

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 265

Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

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)...

275073.35

527372.35

(ii) Unitemized.....

166763.37

292166.37

(iii) TOTAL of contributions from individuals .

441836.72

819538.72

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees (such as PACs)...

32728.00

42728.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

474564.72

862266.72

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ...

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

100100.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

100100.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

474564.72

962366.72

1402122298

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	321190.16	493602.53
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 ...	2599.00	2599.00
(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))...	2599.00	2599.00
21. OTHER DISBURSEMENTS...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	323789.16	496201.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	315389.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	474564.72
25. SUBTOTAL (add Line 23 and Line 24)...	789954.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	323789.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	466165.19

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

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

FOR LINE NUMBER: PAGE 5 OF 265
(check only one)

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

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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JOSEPH ABBOTT

Mailing Address **1036 ABBOTT LANE**

City **SUMMIT** State **MS** Zip Code **39666**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014

Transaction ID : **SA11AI.13588**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT ABRAMS

Mailing Address **P.O. BOX 659**

City **NORTH SALEM** State **NY** Zip Code **10560-0659**

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

Name of Employer **ABEVILLE PRESS** Occupation **BOOK PUBLISHER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
02 / 03 / 2014

Transaction ID : **SA11AI.22699**

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JEFF ABSHER

Mailing Address **130 KNAPP ROAD**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

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

Name of Employer **LOCKHEED MARTIN** Occupation **FIELD ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **390.00**

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : **SA11AI.15425**

Amount of Each Receipt this Period
250.00

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

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

600.00

1402122300

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANDY ALISBERG

Mailing Address 12 DEWART ROAD

City GREENWICH State CT Zip Code 06830-3417

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21162

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
DUANE ALTON

Mailing Address 712 N LANCASHIRE LN

City LIBERTY LAKE State WA Zip Code 99019-8531

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20970

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
SCOTT ANDERSON

Mailing Address 7525 S FLANDERS ST

City CENTENNIAL State CO Zip Code 80016-1914

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

Name of Employer SEAKR ENGINEERING Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014

Transaction ID : SA11AI.19031

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1750.00

1402122301

**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 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

JEAN ANGLE

A.

Mailing Address 35 VIA VERDE ST

City State Zip Code
WICHITA KS 67230-1605

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.20667

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

FRANK BAIO

B.

Mailing Address 1810 W 7TH ST

City State Zip Code
BROOKLYN NY 11223

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
02 / 05 / 2014

Transaction ID : SA11AI.22735

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SUSAN T BANKSTON

C.

Mailing Address 940 CAROLINE DR

City State Zip Code
BILOXI MS 39532

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21395

Amount of Each Receipt this Period

250.00

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

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

1500.00

1402122302

**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 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) ANTHONY BARTLETT		Date of Receipt MM / DD / YYYY 02 / 04 / 2014
A. Mailing Address 164 ASHLAND PT		Transaction ID : SA11AI.19203
City HENDERSONVILLE	State TN	Zip Code 37075-5544
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer ENTREPRENEUR	Occupation ENTREPRENEUR	EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) ANTHONY BARTLETT		Date of Receipt MM / DD / YYYY 03 / 07 / 2014
B. Mailing Address 164 ASHLAND PT		Transaction ID : SA11AI.16848
City HENDERSONVILLE	State TN	Zip Code 37075-5544
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer ENTREPRENEUR	Occupation ENTREPRENEUR	EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) HAROLD BAXTER		Date of Receipt MM / DD / YYYY 03 / 12 / 2014
C. Mailing Address 663 ISLAND DRIVE		Transaction ID : SA11AI.21110
City PALM BEACH	State FL	Zip Code 33480
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1500.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

1402122303

**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 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
HAROLD BAXTER

Mailing Address **663 ISLAND DRIVE**

City **PALM BEACH** State **FL** Zip Code **33480**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.20949**

Amount of Each Receipt this Period **1000.00**
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
BRUCE BELL

Mailing Address **958 HICKORY AVENUE**

City **DE PERE** State **WI** Zip Code **54115**

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

Name of Employer **BELMARK INC** Occupation **CHAIRMAN/FOUNDER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.20854**

Amount of Each Receipt this Period **500.00**
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
FRED BENTON

Mailing Address **8818 STABLE CREST BLVD**

City **HOUSTON** State **TX** Zip Code **77024-7034**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt **02 / 04 / 2014**
Transaction ID : **SA11AI.18941**

Amount of Each Receipt this Period **1000.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional)..... **2500.00**

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

1402122304

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

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

FOR LINE NUMBER: PAGE 10 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
THOMAS BERRYMAN

A. Mailing Address **PO BOX 787**

City **ASHLAND** State **KS** Zip Code **67831**

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

Name of Employer **GODLY PLAY RESOURCES** Occupation **GENERAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : **SA11AI.21234**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
SHERIDAN C BIGGS

B. Mailing Address **PO BOX 160**

City **QUAKER STREET** State **NY** Zip Code **12141**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.20852**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
WILLIAM BILLINGSLEY

C. Mailing Address **569 N. OLD CANTON RD**

City **MADISON** State **MS** Zip Code **39110**

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

Name of Employer **HOME HEALTH CARE AFFILIATES** Occupation **HOME HEALTH**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
02 / 22 / 2014

Transaction ID : **SA11AI.20797**

Amount of Each Receipt this Period
500.00

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

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

1000.00

1402122305

**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 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 01 / 17 / 2014

Transaction ID : SA11AI.17662

Amount of Each Receipt this Period
 25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 267.00

Date of Receipt
 MM / DD / YYYY
 01 / 31 / 2014

Transaction ID : SA11AI.18584

Amount of Each Receipt this Period
 17.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 367.00

Date of Receipt
 MM / DD / YYYY
 02 / 10 / 2014

Transaction ID : SA11AI.19441

Amount of Each Receipt this Period
 100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

142.00

1402122306

**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 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 467.00

Date of Receipt: 02 / 28 / 2014
Transaction ID : SA11AI.14266

Amount of Each Receipt this Period: 100.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 492.00

Date of Receipt: 03 / 14 / 2014
Transaction ID : SA11AI.15908

Amount of Each Receipt this Period: 25.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address 12519 WESTMERE DR

City HOUSTON State TX Zip Code 77077-3927

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

Name of Employer EXXONMOBIL Occupation GEOPHYSICIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 511.00

Date of Receipt: 03 / 20 / 2014
Transaction ID : SA11AI.13856

Amount of Each Receipt this Period: 19.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

144.00

1402122307

**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 265
<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CAROL BOGOSIAN

Mailing Address 105 MARLAND RD S

City COLORADO SPRINGS	State CO	Zip Code 80906-4350
--------------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTOR
-----------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
MM / DD / YYYY
01 / 09 / 2014

Transaction ID : SA11AI.21606

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
MARTIN BOLES

Mailing Address 333 SOUTH HOPE STREET SUITE 3000

City LOS ANGELES	State CA	Zip Code 90071-3039
---------------------	-------------	------------------------

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

Name of Employer KIRKLAND & ELLIS	Occupation LAWYER
--------------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.21375

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MR. BO BOURNE

Mailing Address 2256 LAKE CIRCLE

City JACKSON	State MS	Zip Code 39211
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
-------------------------------------------	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.20723

Amount of Each Receipt this Period
250.00

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

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

1500.00

1402122308

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

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

FOR LINE NUMBER: PAGE 14 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MRS. JEAN A. BOZICH

Mailing Address 7267 ELY LAKE DR

City State Zip Code
EVELETH MN 55734-4007

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
MALTON ELECTRIC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.21056

Amount of Each Receipt this Period
 1000.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
SUSIE BRABEC

Mailing Address 2151 SHEFFIELD DRIVE

City State Zip Code
JACKSON MI 39211

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED PHARMACIST

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
 03 / 08 / 2014

Transaction ID : SA11AI.14927

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
MR. HARRY A. BRANDT

Mailing Address 4711 VAN KLEECK DR

City State Zip Code
NEW SMYRNA BEACH FL 32169-4208

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
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.21000

Amount of Each Receipt this Period
 2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

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

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

3850.00

1402122309

**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 15 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN F. BRAUER

Mailing Address 11250 HUNTER DR

City BRIDGETON State MO Zip Code 63044

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

Name of Employer HUNTER ENGINEERING COMPANY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.20750

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN F. BRAUER

Mailing Address 11250 HUNTER DR

City BRIDGETON State MO Zip Code 63044

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

Name of Employer HUNTER ENGINEERING COMPANY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 5200.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.20751

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN R BREHMER

Mailing Address 201 SEABREEZE COURT

City VERO BEACH State FL Zip Code 32963-9508

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20898

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

7800.00

14021222310

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

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

FOR LINE NUMBER: PAGE 16 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. JOHN R BREHMER

Mailing Address **201 SEABREEZE COURT**

City **VERO BEACH** State **FL** Zip Code **32963-9508**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.20901**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MS. LENORE F BROUGHTON

Mailing Address **52 HENRY ST**

City **BURLINGTON** State **VT** Zip Code **05401**

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

Name of Employer **SELF-EMPLOYED** Occupation **SPEECH LANGUAGE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2014

Transaction ID : **SA11AI.14839**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
DAVE BROWNELL

Mailing Address **8345 NW 66TH ST # A7741**

City **MIAMI** State **FL** Zip Code **33166-2626**

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

Name of Employer **LMS OIL** Occupation **PRODUCT SERVICE ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1968.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2014

Transaction ID : **SA11AI.15892**

Amount of Each Receipt this Period
968.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

6168.00

1402122311

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ELIZABETH BRYDEN

Mailing Address **1 WEST 67TH STREET APT. 611**

City NEW YORK	State NY	Zip Code 10023-6200
-------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt

MM	DD	YYYY
03	07	2014

Transaction ID : **SA11AI.21326**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MARY BUERGER

Mailing Address **115 STONY RIDGE COURT**

City HILLSDALE	State MI	Zip Code 49242
--------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify) Other

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.20929**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
JAMES WRAY BUSH

Mailing Address **P.O. BOX 8327**

City LAUREL	State MS	Zip Code 39441
-----------------------	--------------------	--------------------------

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

Name of Employer BUSH CO. REAL ESTATE	Occupation REAL ESTATE
-------------------------------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM	DD	YYYY
02	24	2014

Transaction ID : **SA11AI.20481**

Amount of Each Receipt this Period

500.00

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

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

850.00

1402122312

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

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

FOR LINE NUMBER: PAGE 18 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
K EDWARD BYRD

Mailing Address **PO BOX 641**

City **TUPELO** State **MS** Zip Code **38801**

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

Name of Employer **BYRD CONSULTANTS LLC** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

MM	DD	YYYY
02	19	2014

Transaction ID : **SA11AI.20768**

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
EARL CALDWELL

Mailing Address **172 N PLAZA CT**

City **MT PLEASANT** State **SC** Zip Code **29464-6301**

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

Name of Employer **APR** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt

MM	DD	YYYY
01	30	2014

Transaction ID : **SA11AI.18568**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
EARL CALDWELL

Mailing Address **172 N PLAZA CT**

City **MT PLEASANT** State **SC** Zip Code **29464-6301**

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

Name of Employer **APR** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt

MM	DD	YYYY
03	11	2014

Transaction ID : **SA11AI.15865**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

700.00

1402122313

**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 19 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
BRUCE CALHOUN

A. Mailing Address **306 CEDAR RIDGE WAY**

City State Zip Code
DURHAM NC 27705-1983

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 **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014
 Transaction ID : **SA11AI.16955**

Amount of Each Receipt this Period
200.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
THERESA S. CALVERT

B. Mailing Address **P.O. BOX 10026**

City State Zip Code
GULFPORT MS 39505

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014
 Transaction ID : **SA11AI.20483**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
MRS. SUE M. CANNON

C. Mailing Address **6420 WEST LAKERIDGE RD.**

City State Zip Code
LAKEWOOD CO 80227

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 **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2014
 Transaction ID : **SA11AI.20499**

Amount of Each Receipt this Period
500.00

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

950.00

14021222314

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

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

FOR LINE NUMBER: PAGE 20 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MRS. SUE M. CANNON

A. Mailing Address **6420 WEST LAKERIDGE RD.**

City State Zip Code
LAKEWOOD CO 80227

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
2000.00

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21469**

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
JAMES CANON

B. Mailing Address **PO BOX 9221**

City State Zip Code
WICHITA KS 67277-0221

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

Name of Employer Occupation
PDS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
02 / 20 / 2014

Transaction ID : **SA11AI.19599**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JAMES CANON

C. Mailing Address **PO BOX 9221**

City State Zip Code
WICHITA KS 67277-0221

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

Name of Employer Occupation
PDS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
02 / 25 / 2014

Transaction ID : **SA11AI.14480**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1550.00

1402122315

**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 21 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES CANON

Mailing Address **PO BOX 9221**

City **WICHITA** State **KS** Zip Code **67277-0221**

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

Name of Employer **PDS** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SA11A1.14481**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
JAMES CANON

Mailing Address **PO BOX 9221**

City **WICHITA** State **KS** Zip Code **67277-0221**

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

Name of Employer **PDS** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
03 / 14 / 2014

Transaction ID : **SA11A1.15903**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JANET CARTER

Mailing Address **16746 FM 1853**

City **MORAN** State **TX** Zip Code **76464**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **SA11A1.20661**

Amount of Each Receipt this Period
240.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

290.00

1402122316

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

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

FOR LINE NUMBER: PAGE 22 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MR. JIM CASEY

A. Mailing Address **9 CANYON CREST DRIVE**

City CORONA DEL MAR	State CA	Zip Code 92625
-------------------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation SOFTWARE SALES
------------------------------------------	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.20990**

Amount of Each Receipt this Period

300.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MICHAEL CASTLE, SR.

B. Mailing Address **3119 MERION DR**

City MIRAMAR BEACH	State FL	Zip Code 32550
------------------------------	--------------------	--------------------------

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

Name of Employer PROGRESSIVE PIPELINE	Occupation CEO
-------------------------------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM	DD	YYYY
02	06	2014

Transaction ID : **SA11AI.13508**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
GREGORY CAUTHEN

C. Mailing Address **5049 VALERIE ST**

City BELLAIRE	State TX	Zip Code 77401
-------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
02	20	2014

Transaction ID : **SA11AI.20322**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1550.00

1402122317

**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 23 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GIUSEPPE CECCHI

Mailing Address 1209 ALDEBARAN DRIVE

City MCLEAN	State VA	Zip Code 22101
----------------	-------------	-------------------

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

Name of Employer IDI GROUP COMPANIES	Occupation PRESIDENT
-----------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2014

Transaction ID : SA11AI.22490

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
GIUSEPPE CECCHI

Mailing Address 1209 ALDEBARAN DRIVE

City MCLEAN	State VA	Zip Code 22101
----------------	-------------	-------------------

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

Name of Employer IDI GROUP COMPANIES	Occupation PRESIDENT
-----------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2014

Transaction ID : SA11AI.14984

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WANDA CHANDLER

Mailing Address 1165 WELLINGTON RIDGE DR

City GRENADA	State MS	Zip Code 38901
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : SA11AI.15571

Amount of Each Receipt this Period
250.00

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

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

1750.00

1402122318

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

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

FOR LINE NUMBER: PAGE 24 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GARY CHESSER

Mailing Address **4044 OLD HWY 12**

City **STARKVILLE** State **MS** Zip Code **39759**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
03 / 27 / 2014

Transaction ID : **SA11AI.15618**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RICHARD CLAMPITT

Mailing Address **7261 ASHINGTON DR**

City **DALLAS** State **TX** Zip Code **75225-1704**

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

Name of Employer **RED RIVER PAPER** Occupation **BUSINESS MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
03 / 20 / 2014

Transaction ID : **SA11AI.13769**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
GEORGE L CLARK JR.

Mailing Address **1341 MIDDLE GULF DRIVE #2A**

City **SANIBEL** State **FL** Zip Code **33957**

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

Name of Employer **GEORGE L CLARK INC.** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.20847**

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

850.00

1402122319

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

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

FOR LINE NUMBER: PAGE 25 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ROBERT CLARK

Mailing Address **10510 MOXLEY ROAD**

City **DAMASCUS** State **MD** Zip Code **20872-1353**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : **SA11AI.21088**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
W. M. CLARK

Mailing Address **3716 MAPLEWOOD AVENUE**

City **DALLAS** State **TX** Zip Code **75205**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21414**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address **201 L STREET NW**

City **WASHINGTON** State **DC** Zip Code **20006**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **SA11AI.23554**

Amount of Each Receipt this Period
625.00

**TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]**

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

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

2850.00

1402122320

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

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

FOR LINE NUMBER: PAGE 26 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 03 / 05 / 2014		
A. Mailing Address 201 L STREET NW			Transaction ID : SA11AI.23555		
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 375.00		
FEC ID number of contributing federal political committee. C			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer		Occupation	Election Cycle-to-Date		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date			
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 03 / 05 / 2014		
B. Mailing Address 201 L STREET NW			Transaction ID : SA11AI.23556		
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 835.00		
FEC ID number of contributing federal political committee. C			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer		Occupation	Election Cycle-to-Date		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date			
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 03 / 05 / 2014		
C. Mailing Address 201 L STREET NW			Transaction ID : SA11AI.23558		
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 428.00		
FEC ID number of contributing federal political committee. C			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer		Occupation	Election Cycle-to-Date		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date			
SUBTOTAL of Receipts This Page (optional).....			0.00		
TOTAL This Period (last page this line number only).....			0.00		

1402122321

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

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

FOR LINE NUMBER: PAGE 27 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.23559

Amount of Each Receipt this Period
485.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.23562

Amount of Each Receipt this Period
715.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.23553

Amount of Each Receipt this Period
5965.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122222

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

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

FOR LINE NUMBER: PAGE 28 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

A. Mailing Address 201 L STREET NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.23557

Amount of Each Receipt this Period
2635.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.23560

Amount of Each Receipt this Period
7120.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : SA11AI.23561

Amount of Each Receipt this Period
1525.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122323

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

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

FOR LINE NUMBER: PAGE 29 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23563

Amount of Each Receipt this Period
18330.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23564

Amount of Each Receipt this Period
2075.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23565

Amount of Each Receipt this Period
50.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122324

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

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

FOR LINE NUMBER: PAGE 30 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23568

Amount of Each Receipt this Period
7050.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23569

Amount of Each Receipt this Period
12725.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23570

Amount of Each Receipt this Period
7400.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122325

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

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

FOR LINE NUMBER: PAGE 31 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23571

Amount of Each Receipt this Period
8350.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23572

Amount of Each Receipt this Period
24035.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23573

Amount of Each Receipt this Period
9245.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122326

**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 32 OF 265	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 201 L STREET NW		Transaction ID : SA11AI.23574	
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 5505.00
FEC ID number of contributing federal political committee. C	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 201 L STREET NW		Transaction ID : SA11AI.23575	
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 201 L STREET NW		Transaction ID : SA11AI.23576	
City WASHINGTON	State DC	Zip Code 20006	Amount of Each Receipt this Period 325.00
FEC ID number of contributing federal political committee. C	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]		
Name of Employer	Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

1402122327

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

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

FOR LINE NUMBER: PAGE 33 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : SA11AI.23577

Amount of Each Receipt this Period
 4418.03

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : SA11AI.23578

Amount of Each Receipt this Period
 3545.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : SA11AI.23579

Amount of Each Receipt this Period
 15070.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122328

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

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

FOR LINE NUMBER: PAGE 34 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CHARLES COHN

Mailing Address **9936 VILLA GRANITO LANE**

City **GRANITE BAY** State **CA** Zip Code **95746-6482**

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

Name of Employer **WELLS FARGO ADVISORS** Occupation **FINANCIAL ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
03 / 05 / 2014

Transaction ID : **SA11AI.20546**

Amount of Each Receipt this Period
250.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
CHARLES COHN

Mailing Address **9936 VILLA GRANITO LANE**

City **GRANITE BAY** State **CA** Zip Code **95746-6482**

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

Name of Employer **WELLS FARGO ADVISORS** Occupation **FINANCIAL ADVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
03 / 20 / 2014

Transaction ID : **SA11AI.21128**

Amount of Each Receipt this Period
250.00
 EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MARY COLE

Mailing Address **102 WINDSOR RD.**

City **STARKVILLE** State **MS** Zip Code **39759**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.15491**

Amount of Each Receipt this Period
200.00

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

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

700.00

1402122329

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
BILL COLLINS

Mailing Address 4025 TUCKER RD

City VICKSBURG State MS Zip Code 39183

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : **SA11AI.15104**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
BOBBIE COOK

Mailing Address 15279 N SCOTTSDALE RD STE 400

City SCOTTSDALE State AZ Zip Code 85254-2659

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

Name of Employer SUPERIOR Occupation ADMIN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2014

Transaction ID : **SA11AI.19590**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MR. TOM I. COULTER

Mailing Address 639 8TH STREET

City HUDSON State WI Zip Code 54016-2309

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2014

Transaction ID : **SA11AI.21323**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

600.00

1402122330

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 36 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
OLIVER COX

Mailing Address **105 CEDAR GREEN COVE**

City **CANTON** State **MS** Zip Code **39046**

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

Name of Employer **ARCH WOOD PROTECTION** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
03 / 25 / 2014

Transaction ID : **SA11AI.15583**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JOE CRAIL

Mailing Address **2172 DUPONT DR STE 230**

City **IRVINE** State **CA** Zip Code **92612-1359**

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

Name of Employer **WESTERN MUTUAL** Occupation **EXEC**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
01 / 11 / 2014

Transaction ID : **SA11AI.21573**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JOE CRAIL

Mailing Address **2172 DUPONT DR STE 230**

City **IRVINE** State **CA** Zip Code **92612-1359**

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

Name of Employer **WESTERN MUTUAL** Occupation **EXEC**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.15849**

Amount of Each Receipt this Period
600.00

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

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

1700.00

14021222331

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

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

FOR LINE NUMBER: PAGE 37 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
JOE CRAIL

A. Mailing Address 2172 DUPONT DR STE 230

City State Zip Code
IRVINE CA 92612-1359

FEC ID number of contributing federal political committee.

Name of Employer Occupation
WESTERN MUTUAL EXEC

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.23529

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
PHILIP CROWLEY

B. Mailing Address 12 CARRIAGE HILL DRIVE

City State Zip Code
FAR HILLS NJ 07931-2217

FEC ID number of contributing federal political committee.

Name of Employer Occupation
JOHNSON & JOHNSON LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : SA11AI.21182

Amount of Each Receipt this Period

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MR. DAVID B CRUMP

C. Mailing Address PO BOX 678

City State Zip Code
LUCEDALE MS 39452

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21407

Amount of Each Receipt this Period

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

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

1402122332

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

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

FOR LINE NUMBER: PAGE 38 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
KATHLEEN CULMER

Mailing Address **6404 COOPER PL**

City **PLANO** State **TX** Zip Code **75093-8815**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **01 / 23 / 2014**
Transaction ID : **SA11AI.17912**

Amount of Each Receipt this Period **300.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
MICHAEL CUMBEST

Mailing Address **280 MEMORY OAKS DRIVE**

City **RAYMOND** State **MS** Zip Code **39154**

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

Name of Employer **BCP TECHNICAL SERVICES, INC.** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 25 / 2014**
Transaction ID : **SA11AI.15584**

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
CARL E CUPIT

Mailing Address **172 NEW HOPE RD NE**

City **MEADVILLE** State **MS** Zip Code **39653**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **01 / 28 / 2014**
Transaction ID : **SA11AI.22563**

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **850.00**

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

1402122333

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

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

FOR LINE NUMBER: PAGE 39 OF 265
(check only one)
 11a
 11b
 11c
 11d
 12
 13a
 13b
 14
 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH H DALLAS

Mailing Address **860 EASTERLY DR**

City **BRANDON** State **MS** Zip Code **39042**

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

Name of Employer **DALLAS PRINTING, INC.** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21403**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address **P.O. BOX 590007**

City **ORLANDO** State **FL** Zip Code **32859-0007**

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

Name of Employer **DANIELS MANUFACTURING CORP.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21051**

Amount of Each Receipt this Period
2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MR. GEORGE G. DANIELS

Mailing Address **P.O. BOX 590007**

City **ORLANDO** State **FL** Zip Code **32859-0007**

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

Name of Employer **DANIELS MANUFACTURING CORP.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21052**

Amount of Each Receipt this Period
2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

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

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

6200.00

6200.00

1402122334

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

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

FOR LINE NUMBER: PAGE 40 OF 265

(check only one)

<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
HARTWELL DAVIS

Mailing Address **4109 KENNESAW DRIVE**

City **BIRMINGHAM** State **AL** Zip Code **35213**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	31	2014

Transaction ID : **SA11AI.20843**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
RICHARD DAVIS

Mailing Address **7885 SADDLEBROOK DRIVE**

City **PORT SAINT LUCIE** State **FL** Zip Code **34986-3131**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	31	2014

Transaction ID : **SA11AI.21035**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
WILLIAM DEETER

Mailing Address **14 RYEDALE CT**

City **GREENVILLE** State **SC** Zip Code **29615-6037**

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

Name of Employer **GHS** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	23	2014

Transaction ID : **SA11AI.14708**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

750.00

1402122335

**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 41 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. THOMAS DEFELICE JR.

Mailing Address 500 STATE ROUTE 36

City EATONTOWN State NJ Zip Code 07724-2518

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

Name of Employer CIRCLE BMW Occupation AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.20957

Amount of Each Receipt this Period
 250.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MS. LEIGH ANN DELOACH

Mailing Address POST OFFICE BOX 163

City ELLISVILLE State MS Zip Code 39437

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.21449

Amount of Each Receipt this Period
 1000.00
 EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
EDWIN DEVILBISS

Mailing Address 38 SPARTINA POINT DR

City HILTON HEAD State SC Zip Code 29926-1077

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.21049

Amount of Each Receipt this Period
 500.00
 EARMARKED THROUGH CLUB FOR GROWTH

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

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

1750.00

1402122335

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

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

FOR LINE NUMBER: PAGE 42 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JANET S DEY

Mailing Address **29968 MARQUETTE ST**

City **GARDEN CITY** State **MI** Zip Code **48135**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
02 / 25 / 2014

Transaction ID : **SA11AI.23073**

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
DRUSCILLA DOEHRMAN

Mailing Address **7932 GRAND BAY DR**

City **NAPLES** State **FL** Zip Code **34108**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
03 / 25 / 2014

Transaction ID : **SA11AI.15586**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS M. DOERFLINGER

Mailing Address **62 ESSEX ROAD**

City **SUMMIT** State **NJ** Zip Code **07901-2953**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21252**

Amount of Each Receipt this Period
1000.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

1550.00

1402122337

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

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

FOR LINE NUMBER: PAGE 43 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
RANDALL DOERTER

A. Mailing Address **PO BOX 681694**

City **FRANKLIN** State **TN** Zip Code **37068-1694**

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

Name of Employer **WOOD & HYDE LEATHER CO.** Occupation **MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
02 / 07 / 2014

Transaction ID : **SA11AI.18874**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
MR. DONALD DOUGLASS

B. Mailing Address **150 EDGEWATER WAY**

City **MERRITT ISLAND** State **FL** Zip Code **32953-8347**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21468**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
JAMES DOWNEY

C. Mailing Address **26000 NEW BRIDGE DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2631**

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

Name of Employer **ALTOS SONOMA CORP** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
02 / 18 / 2014

Transaction ID : **SA11AI.22907**

Amount of Each Receipt this Period
400.00

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

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

550.00

1402122338

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

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

FOR LINE NUMBER: PAGE 44 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES DOWNEY

Mailing Address **26000 NEW BRIDGE DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2631**

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

Name of Employer **ALTOS SONOMA CORP** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt **MM / DD / YYYY**
02 / 24 / 2014

Transaction ID : **SA11AI.20519**

Amount of Each Receipt this Period **200.00**

B. Full Name (Last, First, Middle Initial)
JAMES DOWNEY

Mailing Address **26000 NEW BRIDGE DRIVE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-2631**

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

Name of Employer **ALTOS SONOMA CORP** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**
03 / 07 / 2014

Transaction ID : **SA11AI.23183**

Amount of Each Receipt this Period **200.00**

C. Full Name (Last, First, Middle Initial)
EDWARD DVORAK

Mailing Address **17100 INDIAN LANE**

City **VANCELEAVE** State **MS** Zip Code **39565**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**
03 / 31 / 2014

Transaction ID : **SA11AI.15820**

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **900.00**

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

1402122339

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 45 OF 265
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES EDWARDS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014	
Mailing Address 801 SOUTH GARNER STREET		Transaction ID : SA11AI.15917	
City State Zip Code STATE COLLEGE PA 16801	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Occupation SELF-EMPLOYED DOCTOR	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EARMARKED THROUGH SENATE CONSERVATIVE FUND	
Election Cycle-to-Date 1250.00			
Full Name (Last, First, Middle Initial) JAMES EDWARDS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014	
Mailing Address 801 SOUTH GARNER STREET		Transaction ID : SA11AI.14223	
City State Zip Code STATE COLLEGE PA 16801	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Occupation SELF-EMPLOYED DOCTOR	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EARMARKED THROUGH SENATE CONSERVATIVE FUND	
Election Cycle-to-Date 1750.00			
Full Name (Last, First, Middle Initial) CLIFF EHRLICH		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014	
Mailing Address 9710 BEMAN WOODS WAY		Transaction ID : SA11AI.20631	
City State Zip Code POTOMAC MD 20854-5455	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Occupation RETIRED RETIRED	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EARMARKED THROUGH CLUB FOR GROWTH	
Election Cycle-to-Date 300.00			
SUBTOTAL of Receipts This Page (optional).....		1050.00	
TOTAL This Period (last page this line number only).....			

1402122340

**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 46 OF 265
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES ELLER		Date of Receipt MM / DD / YYYY 02 / 11 / 2014
A. Mailing Address 3587 CONRAD AVENUE		Transaction ID : SA11AI.13400
City SAN DIEGO	State CA	Zip Code 92117
FEC ID number of contributing federal political committee.	C []	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date [] 250.00 []	
		Amount of Each Receipt this Period [] 250.00 []

Full Name (Last, First, Middle Initial) JAMES ELLER		Date of Receipt MM / DD / YYYY 03 / 04 / 2014
B. Mailing Address 3587 CONRAD AVENUE		Transaction ID : SA11AI.16898
City SAN DIEGO	State CA	Zip Code 92117
FEC ID number of contributing federal political committee.	C []	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date [] 350.00 []	
		Amount of Each Receipt this Period [] 100.00 []
EARMARKED THROUGH SENATE CONSERVATIVE FUND		

Full Name (Last, First, Middle Initial) JAMES ELLER		Date of Receipt MM / DD / YYYY 03 / 28 / 2014
C. Mailing Address 3587 CONRAD AVENUE		Transaction ID : SA11AI.15573
City SAN DIEGO	State CA	Zip Code 92117
FEC ID number of contributing federal political committee.	C []	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date [] 850.00 []	
		Amount of Each Receipt this Period [] 500.00 []

SUBTOTAL of Receipts This Page (optional).....	[] 850.00 []
TOTAL This Period (last page this line number only).....	[] [] []

1402122341

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

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

FOR LINE NUMBER: PAGE 47 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
EDDIE LEE ENDOM

A. Mailing Address P.O. DRAWER 10

City State Zip Code
ELLISVILLE MS 39437

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

Name of Employer Occupation
ENDOM TRAILER SALES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2014

Transaction ID : SA11AI.13037

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
RICK ESPOSITO

B. Mailing Address 4 HAMILTON RD

City State Zip Code
HARRISON NY 10528-1504

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

Name of Employer Occupation
NORTH SHORE UNIVERSITY MEDICAL CENT PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.20166

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JONATHAN FARBER

C. Mailing Address 274 RIVERSIDE AVENUE

City State Zip Code
WESTPORT CT 06880

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

Name of Employer Occupation
LIME ROCK MANAGEMENT INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.21181

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

2250.00

1402122342

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

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

FOR LINE NUMBER: PAGE 48 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEVEN FERRELL

Mailing Address **4405 JESSICA DRIVE**

City **SOUTHAVEN** State **MS** Zip Code **38672**

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

Name of Employer **SELF-EMPLOYED** Occupation **PRESIDENT/OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014

Transaction ID : **SA11AI.13325**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. SEAN M FIELER

Mailing Address **40 HASLET AVE**

City **PRINCETON** State **NJ** Zip Code **08540-4914**

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

Name of Employer **EQUINOX PARTNERS, LP** Occupation **FINANCIAL ADVISER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21412**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
ELAINE FIVELAND

Mailing Address **27468 PROMINENCE ROAD**

City **SUN CITY** State **CA** Zip Code **92586**

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

Name of Employer **KAISER PERMANENTE MEDICAL GROUP** Occupation **MEDICAL TRANSCRIPTIONIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.20926**

Amount of Each Receipt this Period
100.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

2950.00

1402122343

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

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

FOR LINE NUMBER: PAGE 49 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
PEARL FOLLMAN

Mailing Address **PO BOX 191223**

City **BROOKLYN** State **NY** Zip Code **11219-7223**

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

Name of Employer **FOLLMAN** Occupation **BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**
02 / 21 / 2014

Transaction ID : **SA11AI.20343**

Amount of Each Receipt this Period **250.00**

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
CARL D FORD

Mailing Address **POST OFFICE BOX 52**

City **LAUREL** State **MS** Zip Code **39441**

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

Name of Employer **CARL D FORD ATTORNEY** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **MM / DD / YYYY**
01 / 07 / 2014

Transaction ID : **SA11AI.13083**

Amount of Each Receipt this Period **100.00**

C. Full Name (Last, First, Middle Initial)
CARL D FORD

Mailing Address **POST OFFICE BOX 52**

City **LAUREL** State **MS** Zip Code **39441**

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

Name of Employer **CARL D FORD ATTORNEY** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt **MM / DD / YYYY**
03 / 31 / 2014

Transaction ID : **SA11AI.15808**

Amount of Each Receipt this Period **200.00**

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

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

550.00

1402122344

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

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

FOR LINE NUMBER: PAGE 50 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
ZACKARY FORDHAM

A. Mailing Address **4500 13TH STREET**

City **GULFPORT** State **MS** Zip Code **39502**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11AI.20501**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
RICHARD FRANKLIN

B. Mailing Address **1235 MANOR LN**

City **MT PLEASANT** State **SC** Zip Code **29464-5188**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
01 / 21 / 2014

Transaction ID : **SA11AI.18446**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
CARLA FRATES

C. Mailing Address **5121 TITLEIST WAY**

City **EL DORADO HILLS** State **CA** Zip Code **95762-7652**

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

Name of Employer **SELF-EMPLOYED** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **SA11AI.15112**

Amount of Each Receipt this Period
100.00

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

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

700.00

1402122345

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

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

FOR LINE NUMBER: PAGE 51 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
DARYL GAMBRELL

A. Mailing Address 171 COUNTY ROAD 713

City STRINGER	State MS	Zip Code 39481
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2014

Transaction ID : SA11AI.15105

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
JAMES GAMBRELL

B. Mailing Address 171 COUNTY ROAD 713

City STRINGER	State MS	Zip Code 39481-4626
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.15457

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
GENE GARRETT

C. Mailing Address PO BOX 731

City TERRELL	State TX	Zip Code 75160-0014
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FEC ID number of contributing federal political committee. **C**

Name of Employer F&G IND	Occupation SALES
-----------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2014

Transaction ID : SA11AI.18378

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

450.00

1402122346

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

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

FOR LINE NUMBER: PAGE 52 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W GARTHWAIT

Mailing Address **PO BOX 1367**

City **WATERBURY** State **CT** Zip Code **06721**

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

Name of Employer **CLY-DEL MANUFACTURING CO.** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21457**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LAWRENCE GASLOW

Mailing Address **105 MADISON AVE**

City **NEW YORK** State **NY** Zip Code **10016**

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

Name of Employer **EMPIRE OFFICE** Occupation **INTERIOR OFFICE DESIGNS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
03 / 28 / 2014

Transaction ID : **SA11AI.21242**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
IRVIN GATLIN

Mailing Address **3159 HIGHWAY 84 E.**

City **LAUREL** State **MS** Zip Code **39443-6107**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
02 / 18 / 2014

Transaction ID : **SA11AI.13626**

Amount of Each Receipt this Period
250.00

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

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

3350.00

1402122347

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

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

FOR LINE NUMBER: PAGE 53 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
IRVIN H. GATLIN

Mailing Address 3159 HIGHWAY 84 E.

City LAUREL	State MS	Zip Code 39443-6107
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 14 / 2014

Transaction ID : SA11AI.13600

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
IRVIN H. GATLIN

Mailing Address 3159 HIGHWAY 84 E.

City LAUREL	State MS	Zip Code 39443-6107
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : SA11AI.15068

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
IRVIN H. GATLIN

Mailing Address 3159 HIGHWAY 84 E.

City LAUREL	State MS	Zip Code 39443-6107
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2014

Transaction ID : SA11AI.14996

Amount of Each Receipt this Period
250.00

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

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

750.00

1402122348

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

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

FOR LINE NUMBER: PAGE 54 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
IRVIN H. GATLIN

Mailing Address **3159 HIGHWAY 84 E.**

City **LAUREL** State **MS** Zip Code **39443-6107**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 29 / 2014**
Transaction ID : **SA11AI.15556**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
LAWRENCE GELMAN

Mailing Address **3900 SUNDOWN DRIVE**

City **MCALLEN** State **TX** Zip Code **78503**

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

Name of Employer **MCALLEN ANESTHESIA** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.15437**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial)
LAWRENCE GELMAN

Mailing Address **3900 SUNDOWN DRIVE**

City **MCALLEN** State **TX** Zip Code **78503**

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

Name of Employer **MCALLEN ANESTHESIA** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **5200.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.81301**

Amount of Each Receipt this Period **100.00**

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

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

850.00

1402122349

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

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

FOR LINE NUMBER: PAGE 55 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
RICHARD GILDER

A. Mailing Address 1775 BORADWAY FRNT 3

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
GILDER GAGNON HOWE & CO LLC STOCK BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20845

Amount of Each Receipt this Period
2000.00
EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
JAMES GLASS

B. Mailing Address 7147 RAVENS RUN

City State Zip Code
CINCINNATI OH 45244-3594

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

Name of Employer Occupation
ENTREPRENEUR ENTREPRENEUR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
542.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : SA11AI.17118

Amount of Each Receipt this Period
542.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JOHN GODDARD

C. Mailing Address P.O. BOX 15550

City State Zip Code
LOVES PARK IL 61132

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

Name of Employer Occupation
INVESTMENT RESOURCES CORPORATION PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SA11AI.20515

Amount of Each Receipt this Period
1000.00

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

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

3542.00

14021222350

**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 56 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
ELENA GOYANES

Mailing Address **3215 TARRYHOLLOW DR**

City	State	Zip Code
AUSTIN	TX	78703

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11AI.20872

Amount of Each Receipt this Period
 2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
EVERADO GOYANES

Mailing Address **3215 TARRYHOLLOW DRIVE**

City	State	Zip Code
AUSTIN	TX	78703

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11AI.20876

Amount of Each Receipt this Period
 2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MR. OLIVER R. GRACE JR.

Mailing Address **265 SUNRISE AVENUE
SUITE 204A**

City	State	Zip Code
PALM BEACH	FL	33480-3891

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

Name of Employer	Occupation
DEVELOPMENT SERVICES LLC	MANAGING MEMBER

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11AI.20964

Amount of Each Receipt this Period
 2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

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

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

7800.00

1402122351

**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 57 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RICHARD GRAHAM

Mailing Address **4615 NORTH PARK DRIVE**

City **COLORADO SPRINGS** State **CO** Zip Code **80918**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.15440**

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
RICHARD GRAHAM

Mailing Address **4615 NORTH PARK DRIVE**

City **COLORADO SPRINGS** State **CO** Zip Code **80918**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **3000.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.23530**

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
MS. JO ANN L. GREB

Mailing Address **8861 W WILSON BAY DR**

City **HAYWARD** State **WI** Zip Code **54843-5221**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21090**

Amount of Each Receipt this Period
250.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

1250.00

1402122352

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

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

FOR LINE NUMBER: PAGE 58 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
WILLIAM TRIMBLE GREEN

Mailing Address **PO BOX 2097**

City **LAUREL** State **MS** Zip Code **39442**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
01 / **02** / **2014**

Transaction ID : **SA11AI.12995**

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
AARON GREGORY

Mailing Address **PO BOX 1464**

City **COLUMBUS** State **MS** Zip Code **39703**

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

Name of Employer **GREGORY CONSTRUCTION SERVICES, INC.** Occupation **SELF EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
01 / **30** / **2014**

Transaction ID : **SA11AI.13302**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. MARK S GRIFFIN

Mailing Address **9290 ORANGE AVE**

City **FORT PIERCE** State **FL** Zip Code **34945**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
03 / **31** / **2014**

Transaction ID : **SA11AI.21447**

Amount of Each Receipt this Period
800.00

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

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

1450.00

1402122353

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 59 OF 265
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CARL GUSTKE

Mailing Address 233 STATON RD

City	State	Zip Code
CABOT	AR	72023-9420

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FEDEX	PILOT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.17310

Amount of Each Receipt this Period

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
KURT HAHN

Mailing Address 527 MELODY LN

City	State	Zip Code
ATHENS	PA	18810-0256

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ELMIRA PSYCHIATRIC CENTER	PSYCHIATRIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014

Transaction ID : SA11AI.18936

Amount of Each Receipt this Period

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
KURT HAHN

Mailing Address 527 MELODY LN

City	State	Zip Code
ATHENS	PA	18810-0256

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ELMIRA PSYCHIATRIC CENTER	PSYCHIATRIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.19549

Amount of Each Receipt this Period

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1402122235A

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

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

FOR LINE NUMBER: PAGE 60 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
KURT HAHN

A. Mailing Address **527 MELODY LN**

City **ATHENS** State **PA** Zip Code **18810-0256**

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

Name of Employer **ELMIRA PSYCHIATRIC CENTER** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
02 / 26 / 2014

Transaction ID : **SA11AI.14457**

Amount of Each Receipt this Period
9.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
KURT HAHN

B. Mailing Address **527 MELODY LN**

City **ATHENS** State **PA** Zip Code **18810-0256**

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

Name of Employer **ELMIRA PSYCHIATRIC CENTER** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt
02 / 28 / 2014

Transaction ID : **SA11AI.14458**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
KURT HAHN

C. Mailing Address **527 MELODY LN**

City **ATHENS** State **PA** Zip Code **18810-0256**

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

Name of Employer **ELMIRA PSYCHIATRIC CENTER** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **276.00**

Date of Receipt
03 / 15 / 2014

Transaction ID : **SA11AI.16102**

Amount of Each Receipt this Period
6.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

40.00

1402122355

**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 61 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
KURT HAHN

Mailing Address **527 MELODY LN**

City **ATHENS** State **PA** Zip Code **18810-0256**

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

Name of Employer **ELMIRA PSYCHIATRIC CENTER** Occupation **PSYCHIATRIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **281.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : **SA11AI.13687**

Amount of Each Receipt this Period
5.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
RUBY L HALE

Mailing Address **11823 WILCREST**

City **HOUSTON** State **TX** Zip Code **77031**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20653**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MR. GEORGE E. HAM

Mailing Address **4304 S MILLS ST.**

City **INDEPENDENCE** State **MO** Zip Code **64055-5135**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : **SA11AI.20669**

Amount of Each Receipt this Period
500.00

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

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

755.00

1402122356

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

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

FOR LINE NUMBER: PAGE 62 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RUTH M HAMMERMAN

Mailing Address **804 SANDERSON RD**

City **MANTACHIE** State **MS** Zip Code **38855**

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

Name of Employer **BEST EFFORTS INFORMATION REQUESTED** Occupation **BEST EFFORTS INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt
01 / **20** / **2014**

Transaction ID : **SA11AI.13234**

Amount of Each Receipt this Period
260.00

B. Full Name (Last, First, Middle Initial)
MR. JACK E. HARRISON

Mailing Address **881 OAK BOWERY RD**

City **ELLISVILLE** State **MS** Zip Code **39437**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
03 / **24** / **2014**

Transaction ID : **SA11AI.20702**

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
SARA HARTSAW

Mailing Address **1327 OVERDALE DR.**

City **GILLETTE** State **WY** Zip Code **82718**

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

Name of Employer **SELF-EMPLOYED** Occupation **SURGEON**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
01 / **22** / **2014**

Transaction ID : **SA11AI.13215**

Amount of Each Receipt this Period
500.00

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

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

2760.00

1402122357

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

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

FOR LINE NUMBER: PAGE 63 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
SARA HARTSAW

A. Mailing Address 1327 OVERDALE DR.

City State Zip Code
GILLETTE WY 82718

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : SA11AI.15232

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
WILLIAM HARVIE

B. Mailing Address 9747 PEBBLE BEACH DRIVE

City State Zip Code
SANTEE CA 92071

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TORREY PINES HIGH SCHOOL TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.15603

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
MR. ROLAND J HAZLETT

C. Mailing Address 740 LAGOON RD

City State Zip Code
VERO BEACH FL 32963-2259

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
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.21376

Amount of Each Receipt this Period
500.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

1250.00

1402122353

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

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

FOR LINE NUMBER: PAGE 64 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. ROLAND J HAZLETT

Mailing Address **740 LAGOON RD**

City **VERO BEACH** State **FL** Zip Code **32963-2259**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.20909**

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
DANIEL HERNANDEZ

Mailing Address **90 COMMONWEALTH CT.**
1

City **VERNON HILLS** State **IL** Zip Code **60061**

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

Name of Employer **CHSD128** Occupation **WEBMASTER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : **SA11AI.13669**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DANIEL HERNANDEZ

Mailing Address **90 COMMONWEALTH CT.**
1

City **VERNON HILLS** State **IL** Zip Code **60061**

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

Name of Employer **CHSD128** Occupation **WEBMASTER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : **SA11AI.15076**

Amount of Each Receipt this Period
25.00

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

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

775.00

1402122359

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
HEIDI B HERNANDEZ

A. Mailing Address 113 DOMINICA COURT

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014

Transaction ID : SA11A1.13651

City State Zip Code
SLIDELL LA 70458

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
250.00

Name of Employer Occupation
CHILDREN'S INTERNATIONAL, LLC BUSINESS MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Full Name (Last, First, Middle Initial)
JULIAN BRYANT HILL

B. Mailing Address 411 MARILYN DRIVE

Date of Receipt
MM / DD / YYYY
02 / 05 / 2014

Transaction ID : SA11A1.13405

City State Zip Code
LAFAYETTE LA 70503

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
250.00

Name of Employer Occupation
SELF-EMPLOYED INDEPENDENT CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Full Name (Last, First, Middle Initial)
TATNALL LEA HILLMAN

C. Mailing Address P.O. BOX 332

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11A1.21368

City State Zip Code
CHILMARK MA 02535-0332

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
2600.00

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

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

3100.00

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

14021222360

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

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

FOR LINE NUMBER: PAGE 66 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
TATNALL LEA HILLMAN

Mailing Address P.O. BOX 332

City State Zip Code
CHILMARK MA 02535-0332

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.21369

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
S. NED HINTON JR.

Mailing Address P.O. BOX 4153

City State Zip Code
LAUREL MS 39441

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

Name of Employer Occupation
SELF-EMPLOYED VETERINARIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SA11AI.20448

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
NORMAN HOFFER

Mailing Address P. O. BOX 525

City State Zip Code
HERSHEY PA 17033

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2014

Transaction ID : SA11AI.13358

Amount of Each Receipt this Period
500.00

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

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

3400.00

1402122361

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

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

FOR LINE NUMBER: PAGE 67 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
LEE M. HOLMES

A. Mailing Address **PO BOX AR**

City **HAGATNA** State **GU** Zip Code **96932-7564**

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

Name of Employer **SOUTHERN MEDIA,INC** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
01 / 09 / 2014

Transaction ID : **SA11AI.21590**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
LEE M. HOLMES

B. Mailing Address **PO BOX AR**

City **HAGATNA** State **GU** Zip Code **96932-7564**

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

Name of Employer **SOUTHERN MEDIA,INC** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1112.00**

Date of Receipt
03 / 04 / 2014

Transaction ID : **SA11AI.16990**

Amount of Each Receipt this Period
362.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
WILLIAM HOTALING

C. Mailing Address **125 QUASSAICK AVE**

City **NEW WINDSOR** State **NY** Zip Code **12553-6635**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
03 / 09 / 2014

Transaction ID : **SA11AI.15888**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

712.00

1402122362

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 68 OF 265	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
WILLIAM HOTALING

Mailing Address **125 QUASSAICK AVE**

City **NEW WINDSOR** State **NY** Zip Code **12553-6635**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : **SA11AI.15889**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
CONDON HUGHES

Mailing Address **1216 56TH STREET**

City **MERIDIAN** State **MS** Zip Code **39305-1400**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2014

Transaction ID : **SA11AI.21178**

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
HARRY HUNT

Mailing Address **800 HETHWOOD BOULEVARD**

City **BLACKSBURG** State **VA** Zip Code **24060-4207**

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

Name of Employer **HHHUNT** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20562**

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

800.00

1402122363

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

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

FOR LINE NUMBER: PAGE 69 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) RODNEY A. HUNT		Date of Receipt MM / DD / YYYY 01 / 15 / 2014
Mailing Address 971 LLAKEWOOD DRIVE ST DOMINICS MEDICAL OFFICE BUILDIN		Transaction ID : SA11AI.13246
City JACKSON	State MS	Zip Code 39216
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYEED	Occupation ORAL SURGEON	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1130.00	

Full Name (Last, First, Middle Initial) RODNEY A. HUNT		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 971 LLAKEWOOD DRIVE ST DOMINICS MEDICAL OFFICE BUILDIN		Transaction ID : SA11AI.21504
City JACKSON	State MS	Zip Code 39216
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYEED	Occupation ORAL SURGEON	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2130.00	

Full Name (Last, First, Middle Initial) SANDRA FAYE INMAN		Date of Receipt MM / DD / YYYY 03 / 28 / 2014
Mailing Address 200 DOMINICAN DRIVE APT 2207		Transaction ID : SA11AI.21218
City MADISON	State MS	Zip Code 39110
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

14021222364

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

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

FOR LINE NUMBER: PAGE 70 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GERALD JACKNOW

Mailing Address 4001 LAKEPLACE LN

City AUSTIN	State TX	Zip Code 78746-1638
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.20637

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
ABSHER JEFF ABSHER

Mailing Address 130 KNAPP ROAD

City OCEAN SPRINGS	State MS	Zip Code 39564
-----------------------	-------------	-------------------

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

Name of Employer LOCKHEED MARTIN	Occupation ENGINEER
-------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SA11AI.14845

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BOMGAARS JOEL BOMGAARS

Mailing Address 357 KIOWA DR.

City MADISON	State MS	Zip Code 39110
-----------------	-------------	-------------------

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

Name of Employer BOMGAR CORPORATION	Occupation EXECUTIVE
----------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014

Transaction ID : SA11AI.14891

Amount of Each Receipt this Period
1000.00

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

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

2250.00

1402122365

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address **19 SAINT ANDREWS DR**

City JACKSON	State MS	Zip Code 39211
------------------------	--------------------	--------------------------

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

Name of Employer MCGOWAN WORKING PARTNERS INC	Occupation GEOLOGIST
---------------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt

MM	DD	YYYY
01	07	2014

Transaction ID : **SA11AI.13093**

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address **19 SAINT ANDREWS DR**

City JACKSON	State MS	Zip Code 39211
------------------------	--------------------	--------------------------

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

Name of Employer MCGOWAN WORKING PARTNERS INC	Occupation GEOLOGIST
---------------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt

MM	DD	YYYY
01	14	2014

Transaction ID : **SA11AI.13025**

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address **19 SAINT ANDREWS DR**

City JACKSON	State MS	Zip Code 39211
------------------------	--------------------	--------------------------

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

Name of Employer MCGOWAN WORKING PARTNERS INC	Occupation GEOLOGIST
---------------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
691.00

Date of Receipt

MM	DD	YYYY
01	24	2014

Transaction ID : **SA11AI.13146**

Amount of Each Receipt this Period
41.00

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

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

191.00

1402122366

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

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

FOR LINE NUMBER: PAGE 72 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address 19 SAINT ANDREWS DR

City JACKSON State MS Zip Code 39211

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

Name of Employer MCGOWAN WORKING PARTNERS INC Occupation GEOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 741.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014

Transaction ID : SA11AI.13444

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address 19 SAINT ANDREWS DR

City JACKSON State MS Zip Code 39211

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

Name of Employer MCGOWAN WORKING PARTNERS INC Occupation GEOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 841.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2014

Transaction ID : SA11AI.15012

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

Mailing Address 19 SAINT ANDREWS DR

City JACKSON State MS Zip Code 39211

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

Name of Employer MCGOWAN WORKING PARTNERS INC Occupation GEOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1091.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : SA11AI.15636

Amount of Each Receipt this Period
250.00

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

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

400.00

1402122367

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

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

FOR LINE NUMBER: PAGE 73 OF 265
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
CHARLES JOHNSON

A. Mailing Address 19 SAINT ANDREWS DR

City JACKSON State MS Zip Code 39211

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

Name of Employer MCGOWAN WORKING PARTNERS INC Occupation GEOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1391.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.15654

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
JIM JOHNSON

B. Mailing Address PO BOX 1144

City TROY State MT Zip Code 59935-1144

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

Name of Employer CHLOR RID Occupation MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.18473

Amount of Each Receipt this Period
 100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JIM JOHNSON

C. Mailing Address PO BOX 1144

City TROY State MT Zip Code 59935-1144

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

Name of Employer CHLOR RID Occupation MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.13271

Amount of Each Receipt this Period
 100.00

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

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

500.00

1402122368

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

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

FOR LINE NUMBER: PAGE 74 OF 265
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
JIM JOHNSON

A. Mailing Address **PO BOX 1144**

City **TROY** State **MT** Zip Code **59935-1144**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **690.00**

Date of Receipt
02 / **07** / **2014**

Transaction ID : **SA11AI.19294**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JIM JOHNSON

B. Mailing Address **PO BOX 1144**

City **TROY** State **MT** Zip Code **59935-1144**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **790.00**

Date of Receipt
02 / **26** / **2014**

Transaction ID : **SA11AI.14476**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
JIM JOHNSON

C. Mailing Address **PO BOX 1144**

City **TROY** State **MT** Zip Code **59935-1144**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **887.00**

Date of Receipt
03 / **20** / **2014**

Transaction ID : **SA11AI.13980**

Amount of Each Receipt this Period
97.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

297.00

1402122369

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

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

FOR LINE NUMBER: PAGE 75 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MERRITT JOHNSON

A. Mailing Address **812 LIME ST.**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

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

Name of Employer **SELF-EMPLOYED** Occupation **LANDLORD**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
01 / 24 / 2014

Transaction ID : **SA11AI.13163**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
SYLVIA JOHNSON

B. Mailing Address **2670 N SUGAN RD**

City **NEW HOPE** State **PA** Zip Code **18938-5674**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
01 / 30 / 2014

Transaction ID : **SA11AI.18482**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
KEN JONES

C. Mailing Address **1541 MEADOWBROOK ROAD**

City **JACKSON** State **MS** Zip Code **39211**

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

Name of Employer **SELF-EMPLOYED** Occupation **DOCTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 28 / 2014

Transaction ID : **SA11AI.21193**

Amount of Each Receipt this Period
500.00

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

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

2000.00

14021222370

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

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

FOR LINE NUMBER: PAGE 76 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MRS. LAURA HOLMES JOST

Mailing Address 1500 OCEAN DRIVE
#1105

City MIAMI BEACH State FL Zip Code 33139

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

Name of Employer CHANDLER MANAGEMENT GROUP Occupation INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21094

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MR. PAUL C. JOST

Mailing Address 1500 OCEAN DRIVE
#1105

City MIAMI BEACH State FL Zip Code 33139

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

Name of Employer CHANDLER MANAGEMENT CORPORATION Occupation REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21092

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MR. WALTER KAROPCZYC

Mailing Address 2 PERRY LANE

City NYACK State NY Zip Code 10960-1515

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

Name of Employer BRISTOL CAPITAL, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.21334

Amount of Each Receipt this Period
250.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

5450.00

1402122371

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

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

FOR LINE NUMBER: PAGE 77 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEVEN KATZ

Mailing Address **10774 WILKINS AVE**

City **LOS ANGELES** State **CA** Zip Code **90024**

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

Name of Employer **CONTENT MEDIA CORPORATION** Occupation **VP BUSINESS & LEGAL AFFAIRS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : **SA11AI.14972**

Amount of Each Receipt this Period
201.00

B. Full Name (Last, First, Middle Initial)
MARGARET G KEETON

Mailing Address **2434 FAIRWAY ST**

City **GRENADA** State **MS** Zip Code **38901**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y
02 / 20 / 2014

Transaction ID : **SA11AI.22973**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DEAN KENNEDY

Mailing Address **1004 S SIERRA VISTA AVE**

City **ALHAMBRA** State **CA** Zip Code **91801-4818**

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

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **238.00**

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.20924**

Amount of Each Receipt this Period
100.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

801.00

1402122372

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

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

FOR LINE NUMBER: PAGE 78 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MONICA KEPES

A. Mailing Address 2040 N SEDGWICK ST

City CHICAGO State IL Zip Code 60614-4773

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : **SA11AI.17226**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
MR. DENIS KERASOTES

B. Mailing Address 31 FAIRVIEW LANE

City SPRINGFIELD State IL Zip Code 62711

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11AI.20477**

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
LAURA KERI

C. Mailing Address 17723 SE 259TH PL

City COVINGTON State WA Zip Code 98042

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

Name of Employer **THE BOEING CO.** Occupation **TECHNICAL ILLUSTRATOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : **SA11AI.15642**

Amount of Each Receipt this Period
250.00

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

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

2250.00

1402122373

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

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

FOR LINE NUMBER: PAGE 79 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
DAVID KEYSTON

Mailing Address P.O. BOX 7066

City State Zip Code
CARMEL BY THE CA 93921-7066

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 05 / 2014

Transaction ID : SA11AI.22751

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
DAVID KEYSTON

Mailing Address P.O. BOX 7066

City State Zip Code
CARMEL BY THE CA 93921-7066

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 11 / 2014

Transaction ID : SA11AI.22814

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ALLAN KIRBY

Mailing Address PO BOX 90
14 E MAIN ST

City State Zip Code
MENDHAM NJ 07945-0090

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21140

Amount of Each Receipt this Period

EARMARKED THROUGH CLUB FOR GROWTH

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

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

140212237A

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

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

FOR LINE NUMBER: PAGE 80 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
GERALD KIRKE

A. Mailing Address **5465 MILLS CIVIC PKWY STE 400**

City: **WEST DES MOINES** State: **IA** Zip Code: **50266-5321**

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

Name of Employer: **KIRKE FINANCIAL** Occupation: **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2500.00**

Date of Receipt: **01 / 09 / 2014**
Transaction ID: **SA11AI.13008**

Amount of Each Receipt this Period: **1500.00**

Full Name (Last, First, Middle Initial)
GERALD KIRKE

B. Mailing Address **5465 MILLS CIVIC PKWY STE 400**

City: **WEST DES MOINES** State: **IA** Zip Code: **50266-5321**

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

Name of Employer: **KIRKE FINANCIAL** Occupation: **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: **01 / 09 / 2014**
Transaction ID: **SA11AI.13009**

Amount of Each Receipt this Period: **100.00**

Full Name (Last, First, Middle Initial)
GERALD KIRKE

C. Mailing Address **5465 MILLS CIVIC PKWY STE 400**

City: **WEST DES MOINES** State: **IA** Zip Code: **50266-5321**

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

Name of Employer: **KIRKE FINANCIAL** Occupation: **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3400.00**

Date of Receipt: **01 / 09 / 2014**
Transaction ID: **SA11AI.23531**

Amount of Each Receipt this Period: **800.00**

SUBTOTAL of Receipts This Page (optional)..... **2400.00**

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

1402122375

**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 81 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GERALD KIRKE

Mailing Address **5465 MILLS CIVIC PKWY STE 400**

City **WEST DES MOINES** State **IA** Zip Code **50266-5321**

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

Name of Employer **KIRKE FINANCIAL** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 09 / 2014

Transaction ID : **SA11AI.81299**

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
ROBERT KIRKPATRICK

Mailing Address **28817 OXFORD RD.**

City **LOUISBURG** State **KS** Zip Code **66053-6110**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.20955**

Amount of Each Receipt this Period
750.00
 EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
SCOTT KLEWIT

Mailing Address **33 KIMBERLY DR**

City **LAUREL** State **MS** Zip Code **39440**

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

Name of Employer **BEST EFFORTS INFORMATION REQUESTED** Occupation **BEST EFFORTS INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 14 / 2014

Transaction ID : **SA11AI.13249**

Amount of Each Receipt this Period
250.00

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

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

1600.00

1402122376

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

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

FOR LINE NUMBER: PAGE 82 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY S KOHLER

Mailing Address PO BOX 897

City: SHEBOYGAN State: WI Zip Code: 53082

FEC ID number of contributing federal political committee: C

Name of Employer: WINDWAY CAPITAL CORPORATION Occupation: PUBLIC AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 03 / 31 / 2014
Transaction ID : SA11AI.20823

Amount of Each Receipt this Period: 2600.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MARY S KOHLER

Mailing Address PO BOX 897

City: SHEBOYGAN State: WI Zip Code: 53082

FEC ID number of contributing federal political committee: C

Name of Employer: WINDWAY CAPITAL CORPORATION Occupation: PUBLIC AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 03 / 31 / 2014
Transaction ID : SA11AI.20824

Amount of Each Receipt this Period: 2600.00
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
TERRY J KOHLER

Mailing Address PO BOX 897

City: SHEBOYGAN State: WI Zip Code: 53082

FEC ID number of contributing federal political committee: C

Name of Employer: WINDWAY CAPITAL CORPORATION Occupation: PRESIDENT AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 03 / 31 / 2014
Transaction ID : SA11AI.20832

Amount of Each Receipt this Period: 2600.00
EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional)..... 7800.00

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

1402122377

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

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

FOR LINE NUMBER: PAGE 83 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) TERRY J KOHLER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014	
Mailing Address PO BOX 897		Transaction ID : SA11AI.20833	
City SHEBOYGAN	State WI	Zip Code 53082	Amount of Each Receipt this Period 2600.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee.		C	
Name of Employer WINDWAY CAPITAL CORPORATION	Occupation PRESIDENT AND CEO		Amount of Each Receipt this Period 5200.00 EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2014		
Full Name (Last, First, Middle Initial) ANDREW KOMAREK		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014	
Mailing Address 2033 TURK HILL RD		Transaction ID : SA11AI.17391	
City FAIRPORT	State NY	Zip Code 14450-8407	Amount of Each Receipt this Period 2600.00 EARMARKED THROUGH SENATE CONSERVATIVE FUND
FEC ID number of contributing federal political committee.		C	
Name of Employer ANKOM TECHNOLOGY	Occupation ENGINEER		Amount of Each Receipt this Period 50.00 EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2014		
Full Name (Last, First, Middle Initial) PEGGY KORN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2014	
Mailing Address 2911 HIGHWAY 19 W		Transaction ID : SA11AI.14262	
City BROWNSVILLE	State TN	Zip Code 38012-7407	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH SENATE CONSERVATIVE FUND
FEC ID number of contributing federal political committee.		C	
Name of Employer SELF	Occupation FARMER		Amount of Each Receipt this Period 5250.00 EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2014		
SUBTOTAL of Receipts This Page (optional).....		5250.00	
TOTAL This Period (last page this line number only).....		5250.00	

1402122378

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

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

FOR LINE NUMBER: PAGE 84 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
PEGGY KORN

Mailing Address **2911 HIGHWAY 19 W**

City **BROWNSVILLE** State **TN** Zip Code **38012-7407**

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

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **03 / 04 / 2014**
Transaction ID : **SA11AI.16860**

Amount of Each Receipt this Period **100.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
RICHARD KORPAN

Mailing Address **31483 MORNING STAR DR.**

City **EVERGREEN** State **CO** Zip Code **80439-7969**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.20858**

Amount of Each Receipt this Period **500.00**
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
KARL KRONBERG

Mailing Address **838 ARNOLD RD**

City **LOWELL** State **OH** Zip Code **45744-7195**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt **01 / 30 / 2014**
Transaction ID : **SA11AI.18468**

Amount of Each Receipt this Period **50.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional)..... **650.00**

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

14021222379

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

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

FOR LINE NUMBER: PAGE 85 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) KARL KRONBERG		Date of Receipt MM / DD / YYYY 02 / 20 / 2014
Mailing Address 838 ARNOLD RD		Transaction ID : SA11AI.19571
City LOWELL	State OH	Zip Code 45744-7195
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 45.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 370.00	

Full Name (Last, First, Middle Initial) KARL KRONBERG		Date of Receipt MM / DD / YYYY 02 / 27 / 2014
Mailing Address 838 ARNOLD RD		Transaction ID : SA11AI.14264
City LOWELL	State OH	Zip Code 45744-7195
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 54.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 424.00	

Full Name (Last, First, Middle Initial) ANNE KUHN		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 22474 NORTH NOTTINGHAM DRIVE		Transaction ID : SA11AI.21041
City BEVERLY HILLS	State MI	Zip Code 48025-3519
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

SUBTOTAL of Receipts This Page (optional).....	599.00
TOTAL This Period (last page this line number only).....	

1402122380

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

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

FOR LINE NUMBER: PAGE 86 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
AIVARS KUPLIS

Mailing Address **2070 N. CHARTER POINT DR.**

City **ARLINGTON HTS** State **IL** Zip Code **60004-7221**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
03 / 12 / 2014

Transaction ID : **SA11AI.21107**

Amount of Each Receipt this Period
300.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM LAMAR

Mailing Address **P.O. BOX 16470**

City **JACKSON** State **MS** Zip Code **39236**

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

Name of Employer **SHEDD, YOUNG, AND LANDRETH** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11AI.20727**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
JAMES LANGE

Mailing Address **7278 E COZY CAMP DR**

City **PRESCOTT VALLEY** State **AZ** Zip Code **86314-1955**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
01 / 29 / 2014

Transaction ID : **SA11AI.18469**

Amount of Each Receipt this Period
75.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

2975.00

1402122381

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES LANGE

Mailing Address **7278 E COZY CAMP DR**

City **PRESCOTT VALLEY** State **AZ** Zip Code **86314-1955**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt **MM / DD / YYYY**
02 / 26 / 2014

Transaction ID : **SA11AI.14291**

Amount of Each Receipt this Period **50.00**

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
TERRY LARGENT

Mailing Address **3835 N RANDOLPH CT**

City **ARLINGTON** State **VA** Zip Code **22207-4577**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **378.00**

Date of Receipt **MM / DD / YYYY**
03 / 21 / 2014

Transaction ID : **SA11AI.13801**

Amount of Each Receipt this Period **200.00**

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MR. RICHARD T. LEE

Mailing Address **P.O. BOX 2113**

City **ORLANDO** State **FL** Zip Code **32802**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**
03 / 24 / 2014

Transaction ID : **SA11AI.20753**

Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1250.00**

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

1402122382

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

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

FOR LINE NUMBER: PAGE 88 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
KAREN LIEN

A. Mailing Address **1435 ELEPHANT RD**

City **PERKASIE** State **PA** Zip Code **18944-3809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1111.00**

Date of Receipt
03 / 26 / 2014

Transaction ID : **SA11AI.23484**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
FRAYDA LINDEMANN

B. Mailing Address **1565 NORTH OCEAN WAY**

City **PALM BEACH** State **FL** Zip Code **33480**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11AI.20673**

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
JAMES D. LINDEMANN

C. Mailing Address **840 FM 2224**

City **HOLLIDAY** State **TX** Zip Code **76366**

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

Name of Employer **JAMES D LINDEMANN DRILLING** Occupation **OIL & GAS**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
02 / 24 / 2014

Transaction ID : **SA11AI.20518**

Amount of Each Receipt this Period
1000.00

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

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

2100.00

1402122383

**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)

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

PAGE 89 OF 265

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CHRISTINE M LINDSAY

Mailing Address PO BOX 11621

City LOUDONVILLE State NY Zip Code 12211

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SA11AI.20676**

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
DAN LINDSAY

Mailing Address 159 RED ROAN ROAD

City HATTIESBURG State MS Zip Code 39402

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

Name of Employer **ILSS** Occupation **COMPUTER CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.15812**

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. GARY J LINOPOLI

Mailing Address 769 MCLANE LN

City BILOXI State MS Zip Code 39532

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21400**

Amount of Each Receipt this Period
250.00

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

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

2450.00

1402122384

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

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

FOR LINE NUMBER: PAGE 90 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
BREWSTER MACFARLAND

Mailing Address **415 NORTH STATE STREET, SUITE 1**

City **CHICAGO** State **IL** Zip Code **60654-4607**

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

Name of Employer **LAW BULLETIN PUBLISHING COMPANY** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **SA11AI.20529**

Amount of Each Receipt this Period
200.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
BREWSTER MACFARLAND

Mailing Address **415 NORTH STATE STREET, SUITE 1**

City **CHICAGO** State **IL** Zip Code **60654-4607**

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

Name of Employer **LAW BULLETIN PUBLISHING COMPANY** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : **SA11AI.21370**

Amount of Each Receipt this Period
200.00
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
LANNING MACFARLAND JR.

Mailing Address **415 N STATE STREET
SUITE 1**

City **CHICAGO** State **IL** Zip Code **60654**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 18 / 2014

Transaction ID : **SA11AI.21123**

Amount of Each Receipt this Period
500.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

900.00

1402122385

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. BARNEY MADDOX

Mailing Address **612 ROCKDALE RD**

City **CLEBURNE** State **TX** Zip Code **76033**

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

Name of Employer **SELF-EMPLOYED** Occupation **DOCTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.21073**

Amount of Each Receipt this Period
500.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
KEN MANN

Mailing Address **3747 BERRY DR**

City **STUDIO CITY** State **CA** Zip Code **91604-3855**

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

Name of Employer **FIRST MERCURY** Occupation **INSURANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : **SA11AI.13904**

Amount of Each Receipt this Period
250.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
R. J. MANNING

Mailing Address **1831 PORT KIMBERLY PLACE**

City **NEWPORT BEACH** State **CA** Zip Code **92660**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.20933**

Amount of Each Receipt this Period
100.00
 EARMARKED THROUGH CLUB FOR GROWTH

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

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

850.00

1402122386

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

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

FOR LINE NUMBER: PAGE 92 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
R. J. MANNING

A. Mailing Address 1831 PORT KIMBERLY PLACE

City State Zip Code
NEWPORT BEACH CA 92660

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20965

Amount of Each Receipt this Period
100.00
EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MR. CHAD MARTIN

B. Mailing Address 15005

City State Zip Code
PERLINGTON MS 39572

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21382

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
J.W. MATTHEWS

C. Mailing Address 9931 HYATT RESORT DRIVE
APT 318

City State Zip Code
SAN ANTONIO TX 78251-4166

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
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21071

Amount of Each Receipt this Period
250.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

600.00

1402122387

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

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

FOR LINE NUMBER: PAGE 93 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
01 / **10** / **2014**

Transaction ID : **SA11AI.21565**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
01 / **21** / **2014**

Transaction ID : **SA11AI.17887**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
02 / **28** / **2014**

Transaction ID : **SA11AI.14469**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

300.00

1402122388

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

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

FOR LINE NUMBER: PAGE 94 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : **SA11AI.16813**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
MM / DD / YYYY
03 / 14 / 2014

Transaction ID : **SA11AI.15872**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
MM / DD / YYYY
03 / 15 / 2014

Transaction ID : **SA11AI.15873**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

250.00

1402122389

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

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

FOR LINE NUMBER: PAGE 95 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MARY MATTHEWS

A. Mailing Address **4876 PATRICK RD**

City **WINNSBORO** State **SC** Zip Code **29180-6491**

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

Name of Employer **MONTGOMERY** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
03 / 20 / 2014

Transaction ID : **SA11AI.13767**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
MICHAEL MATTHEWS

B. Mailing Address **35 GRAND BLVD**

City **HATTIESBURG** State **MI** Zip Code **39402**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
03 / 12 / 2014

Transaction ID : **SA11AI.15084**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
MR. GUY MAYBE JR.

C. Mailing Address **2555 STAGECOACH TRAIL**

City **GORDON** State **TX** Zip Code **76453**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11AI.20671**

Amount of Each Receipt this Period
2500.00

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

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

2850.00

1402122390

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

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

FOR LINE NUMBER: PAGE 96 OF 265
(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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. GEORGE L. MAYER

Mailing Address **2 ANDREWS RD**

City ESSEX	State CT	Zip Code 06426
FEC ID number of contributing federal political committee. C		
Name of Employer MANHATTAN REALTY GROUP	Occupation REAL ESTATE INVESTMENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21075**

Amount of Each Receipt this Period
2000.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MARK S MAYFIELD

Mailing Address **109 CHERRY LAUREL LN**

City RIDGELAND	State MS	Zip Code 39157
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Date of Receipt
03 / 28 / 2014

Transaction ID : **SA11AI.21200**

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MARK S MAYFIELD

Mailing Address **109 CHERRY LAUREL LN**

City RIDGELAND	State MS	Zip Code 39157
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21410**

Amount of Each Receipt this Period
300.00

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

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

2500.00

1402122391

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 97 OF 265
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES A MCCULLOUGH

Mailing Address **4025 FRED MARTIN ROAD**

City SUMMIT	State MS	Zip Code 39666
-----------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation FARMER
------------------------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.21401**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DEAN MCGREGOR

Mailing Address **PO BOX 513**

City WILSONVILLE	State OR	Zip Code 97070-0513
----------------------------	--------------------	-------------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
------------------------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

MM	DD	YYYY
03	09	2014

Transaction ID : **SA11AI.21339**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MR. THOMAS K. MCGUIRE

Mailing Address **PO BOX 328**

City BONNERS FERRY	State ID	Zip Code 83805-0328
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.21079**

Amount of Each Receipt this Period
2500.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

3250.00

1402122392

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SHERRY MCMURRY

Mailing Address 493 S MILL CREEK RD

City PURVIS State MS Zip Code 39475

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.15653

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
GREG MCNECE

Mailing Address P.O. BOX 1830

City DAVIS State CA Zip Code 95617-1830

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

Name of Employer DAVISVILLE PROPERTIES, INC. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.19471

Amount of Each Receipt this Period
 250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
GREG MCNECE

Mailing Address P.O. BOX 1830

City DAVIS State CA Zip Code 95617-1830

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

Name of Employer DAVISVILLE PROPERTIES, INC. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.20644

Amount of Each Receipt this Period
 250.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

600.00

1402122393

**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 99 OF 265
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) GREG MCNECE		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
A. Mailing Address P.O. BOX 1830		Transaction ID : SA11AI.20868
City DAVIS	State CA	Zip Code 95617-1830
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer DAVISVILLE PROPERTIES, INC.	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1850.00	

Full Name (Last, First, Middle Initial) GREG MCNECE		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
B. Mailing Address P.O. BOX 1830		Transaction ID : SA11AI.20958
City DAVIS	State CA	Zip Code 95617-1830
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer DAVISVILLE PROPERTIES, INC.	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2100.00	

Full Name (Last, First, Middle Initial) GREGORY MCNECE		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
C. Mailing Address PO BOX 1830		Transaction ID : SA11AI.20892
City DAVIS	State CA	Zip Code 95617-1830
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer DAVISVILLE MANAGEMENT CO.	Occupation PROPERTY MANAGEMENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

1402122394

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GREG MCNEE

Mailing Address **PO BOX 1830**

City **DAVIS** State **CA** Zip Code **95617**

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

Name of Employer **DAVISVILLE PROPERTIES, INC.** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **SA11AI.20593**

Amount of Each Receipt this Period
250.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
SIDNEY ARTHUR MCVEY

Mailing Address **11925 S 49TH W AVE**

City **SAPULPA** State **OK** Zip Code **74066**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.21501**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DENA MEEK

Mailing Address **560 DIAMOND POINT DR**

City **OAK POINT** State **TX** Zip Code **75068-2256**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SA11AI.14634**

Amount of Each Receipt this Period
300.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1550.00

14021222305

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

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

FOR LINE NUMBER: PAGE 101 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES MEMMER

Mailing Address **PO BOX 117806**

City **CARROLLTON** State **TX** Zip Code **75011-7806**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
03 / **10** / **2014**

Transaction ID : **SA11AI.21175**

Amount of Each Receipt this Period
300.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MR. ROBERT A MENG

Mailing Address **22 SHELLWIND DR**

City **SAVANNAH** State **GA** Zip Code **31411-2910**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / **31** / **2014**

Transaction ID : **SA11AI.20916**

Amount of Each Receipt this Period
500.00
 EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
H. KENT MERGLER

Mailing Address **6306 SE OAKMONT PL**

City **STUART** State **FL** Zip Code **34997-8613**

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

Name of Employer **ENTREPRENEUR** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / **31** / **2014**

Transaction ID : **SA11AI.21503**

Amount of Each Receipt this Period
500.00

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

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

1300.00

1402122396

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

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

FOR LINE NUMBER: PAGE 102 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ELDO H MEYER

Mailing Address 1300 S BORDER AVE APT 192

City State Zip Code
WESLACO TX 78596

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
MM / DD / YYYY
01 / 29 / 2014

Transaction ID : SA11AI.22650

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JEFFREY MEYER

Mailing Address 8335 STARRROAD

City State Zip Code
WINDSOR CA 95492

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : SA11AI.15729

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
MR. KENNETH L MEYER

Mailing Address 3910 CABILDO PL

City State Zip Code
OCEAN SPRINGS MS 39564-8552

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21380

Amount of Each Receipt this Period
250.00

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

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

2500.00

1402122397

**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 103 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ERIC MEYERS

Mailing Address 3936 S SEMORAN BLVD # 470

City	State	Zip Code
ORLANDO	FL	32822-4015

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

Name of Employer	Occupation
SELF-EMPLOYED	REAL ESTATE DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014

Transaction ID : SA11AI.14638

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
MR. KENDALL C. MILLER

Mailing Address 7350 S. WAKEFIELD

City	State	Zip Code
REEDLEY	CA	93654

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

Name of Employer	Occupation
KENCAROL INC.	FARM MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.21477

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
CHARLES MILLIKIN

Mailing Address 2347 ESTATE GATE DRIVE

City	State	Zip Code
SAN ANTONIO	TX	78260-2209

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

Name of Employer	Occupation
SELF-EMPLOYED	REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20954

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

900.00

14021222398

**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 104 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JEFF MOE

Mailing Address **16608 RED CANYON RANCH ROAD**

City LOVELAND	State CO	Zip Code 80538
-------------------------	--------------------	--------------------------

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

Name of Employer COALITION TO REDUCE SPENDING	Occupation SELF
---------------------------------------------------------	---------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1024.00

Date of Receipt
 MM / DD / YYYY
01 / 10 / 2014

Transaction ID : **SA11AI.13141**

Amount of Each Receipt this Period
1024.00

B. Full Name (Last, First, Middle Initial)
JEFFREY MOE

Mailing Address **16608 RED CANYON RANCH ROAD**

City LOVELAND	State CO	Zip Code 80538
-------------------------	--------------------	--------------------------

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

Name of Employer ALEEH OBJECTS INC	Occupation PRESIDENT
----------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **SA11AI.15671**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GREGORY MONDON

Mailing Address **955 W 2390 S**

City PERRY	State UT	Zip Code 84302-4921
----------------------	--------------------	-------------------------------

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

Name of Employer WELLS FARGO	Occupation BANKER
----------------------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
931.00

Date of Receipt
 MM / DD / YYYY
03 / 12 / 2014

Transaction ID : **SA11AI.16551**

Amount of Each Receipt this Period
931.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

2955.00

1402122399

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

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

FOR LINE NUMBER: PAGE 106 OF 265
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEPHEN MOTHERWAY

Mailing Address 738 130TH ST.

City State Zip Code
COLLEGE POINT NY 11356-1316

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
500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SA11AI.23254

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
PETER MOYER

Mailing Address 53 FOX RUN ROAD

City State Zip Code
NEW CANAAN CT 06840-2820

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
400.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21144

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
SCOTT MUEHLBERGER

Mailing Address 616 MEMORIAL HEIGHTS DRIVE APT. #1

City State Zip Code
HOUSTON TX 77007-6080

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

Name of Employer Occupation
BRACEWELL & GIULIANI LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.20535

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

1300.00

1402122401

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RONALD H MUHLENKAMP
Mailing Address **725 THREE DEGREE RD**

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI.20827

City State Zip Code
BUTLER PA 16002

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

2600.00

EARMARKED THROUGH CLUB FOR GROWTH

Name of Employer
MUHLENKAMP & CO. INC

Occupation
MGMT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

B. Full Name (Last, First, Middle Initial)
RONALD H MUHLENKAMP
Mailing Address **725 THREE DEGREE RD**

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI.20828

City State Zip Code
BUTLER PA 16002

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

1400.00

EARMARKED THROUGH CLUB FOR GROWTH

Name of Employer
MUHLENKAMP & CO. INC

Occupation
MGMT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

C. Full Name (Last, First, Middle Initial)
SUSAN MULLEN
Mailing Address **401 EAST 86 ST**
APT 16A

Date of Receipt

MM	DD	YYYY
03	29	2014

Transaction ID : SA11AI.15561

City State Zip Code
NEW YORK NY 10028

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

250.00

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

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

4250.00

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

1402122402

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MR. WILLIAM S. MULLINS

A. Mailing Address **10 TWIN OAKS PLACE**

City State Zip Code
LAUREL MS 39440

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

Name of Employer Occupation
HORTMAN HARLOW LAW ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : **SA11AI.20745**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
BEVERLEY MUNFORD III

B. Mailing Address **P.O.BOX 85678**

City State Zip Code
RICHMOND VA 23285

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

Name of Employer Occupation
DAVENPORT & CO. STOCK BROKER

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : **SA11AI.15361**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
LATHROP NELSON

C. Mailing Address **13 COURTNEY CIR**

City State Zip Code
BRYN MAWR PA 19010-3704

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 **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : **SA11AI.19608**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

850.00

1402122403

**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 109 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. THOMAS H. NELSON

Mailing Address 128 LINDSEY DR

City LAUREL State MS Zip Code 39440

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

Name of Employer OFFSET PRESS, INC. Occupation PRINTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11AI.20681

Amount of Each Receipt this Period
300.00

Election Cycle-to-Date
300.00

B. Full Name (Last, First, Middle Initial)
PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831-3104

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 07 / 2014

Transaction ID : SA11AI.21352

Amount of Each Receipt this Period
200.00
EARMARKED THROUGH CLUB FOR GROWTH

Election Cycle-to-Date
400.00

C. Full Name (Last, First, Middle Initial)
PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831-3104

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20912

Amount of Each Receipt this Period
250.00
EARMARKED THROUGH CLUB FOR GROWTH

Election Cycle-to-Date
650.00

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

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

750.00

1402122404

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

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

FOR LINE NUMBER: PAGE 110 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
ROBBIE NICHOLS

A. Mailing Address 105 WALTHALL ST

City GREENWOOD State MS Zip Code 38930-4426

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

Name of Employer SELF-EMPLOYED Occupation INSURANCE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : SA11AI.15402

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
MARILYN NIELSON

B. Mailing Address PO BOX 3384

City TORRANCE State CA Zip Code 90510-3384

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 550.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2014

Transaction ID : SA11AI.18811

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
GERALD H. NOSTRAND

C. Mailing Address 1437 WYNKOOP DR

City COLORADO SPRINGS State CO Zip Code 80909

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

Name of Employer RETIRED Occupation CHRISTIAN COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2014

Transaction ID : SA11AI.13202

Amount of Each Receipt this Period
250.00

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

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

550.00

1402122405

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

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

FOR LINE NUMBER: PAGE 111 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GERALD H. NOSTRAND

Mailing Address 1437 WYNKOOP DR

City COLORADO SPRINGS State CO Zip Code 80909

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

Name of Employer RETIRED Occupation CHRISTIAN COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 01 / 23 / 2014
Transaction ID : SA11AI.13203

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
EDWARD NOWOKUNSKI

Mailing Address 187 COACH CLUB DR

City TITUSVILLE State FL Zip Code 32780-2311

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

Name of Employer BOINGO GRAPHICS, INC Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt 01 / 21 / 2014
Transaction ID : SA11AI.18325

Amount of Each Receipt this Period 300.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
EDWARD NOWOKUNSKI

Mailing Address 187 COACH CLUB DR

City TITUSVILLE State FL Zip Code 32780-2311

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

Name of Employer BOINGO GRAPHICS, INC Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 481.00

Date of Receipt 03 / 04 / 2014
Transaction ID : SA11AI.16940

Amount of Each Receipt this Period 181.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional)..... 731.00

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

1402122406

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 OF 265

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. HAROLD OFSTIE

Mailing Address **919 ORCHID POINT WAY**

City ORCHID	State FL	Zip Code 32963-9518
-----------------------	--------------------	-------------------------------

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

Name of Employer CHARTWELL INVESTMENT PARTNERS	Occupation INVESTOR
----------------------------------------------------------	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.20942**

Amount of Each Receipt this Period

1000.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
ELIZABETH M OLESON

Mailing Address **807 4TH ST**

City KALONA	State IA	Zip Code 32217
-----------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

MM	DD	YYYY
01	01	2014

Transaction ID : **SA11AI.13054**

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
MARTIN ONEAL

Mailing Address **P.O. BOX 118**

City MCHENRY	State MS	Zip Code 39561
------------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
------------------------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

MM	DD	YYYY
03	10	2014

Transaction ID : **SA11AI.14920**

Amount of Each Receipt this Period

200.00

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

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

1500.00

1402122407

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

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

FOR LINE NUMBER: PAGE 113 OF 265
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MS. GWENDOLYN PARKER

Mailing Address **6269 STORMY LANE**

City **OLIVE BRANCH** State **MS** Zip Code **38654**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11AI.20742**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BRADLEY PATANO

Mailing Address **147 PITTMAN RD**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

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

Name of Employer **MACHADO PATANO** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.15510**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RUSHTON PATTERSON

Mailing Address **44 SOUTH FRONT ST.
APT. 3B**

City **MEMPHIS** State **TN** Zip Code **38103**

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

Name of Employer **SELF-EMPLOYED** Occupation **MD**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 / 29 / 2014

Transaction ID : **SA11AI.15414**

Amount of Each Receipt this Period
500.00

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

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

1750.00

1402122408

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

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

FOR LINE NUMBER: PAGE 114 OF 265
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JOY PAYNE

Mailing Address **249 HERITAGE DRIVE**

City **MADISON** State **MS** Zip Code **39110**

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

Name of Employer **MEDASSIST SOLUTIONS** Occupation **CLIENT SERVICES DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **SA11AI.15677**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JOHN PECK JR.

Mailing Address **P.O. BOX 829**

City **RANCHO SANTE FE** State **CA** Zip Code **92067**

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

Name of Employer **PECK ENTERPRISES** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
01 / 15 / 2014

Transaction ID : **SA11AI.13031**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
STEVE PEPALIS

Mailing Address **315 LOCUST DR**

City **COLORADO SPRINGS** State **CO** Zip Code **80907-4349**

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

Name of Employer **MYOB** Occupation **SOFTWARE DEVELOPER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
MM / DD / YYYY
02 / 04 / 2014

Transaction ID : **SA11AI.18815**

Amount of Each Receipt this Period
200.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

3800.00

1402122409

**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 115 OF 265	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) FRANCES PERKINS		Date of Receipt MM / DD / YYYY 01 / 14 / 2014	
A. Mailing Address 941 LUCKNEY ROAD		Transaction ID : SA11AI.13024	
City BRANDON	State MS	Zip Code 39047	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Name of Employer UNEMPLOYED	
Occupation UNEMPLOYED		Election Cycle-to-Date 269.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) FRANCES PERKINS		Date of Receipt MM / DD / YYYY 01 / 21 / 2014	
B. Mailing Address 941 LUCKNEY ROAD		Transaction ID : SA11AI.18283	
City BRANDON	State MS	Zip Code 39047	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Name of Employer UNEMPLOYED	
Occupation UNEMPLOYED		Election Cycle-to-Date 294.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		EARMARKED THROUGH SENATE CONSERVATIVE FUND	

Full Name (Last, First, Middle Initial) FRANCES PERKINS		Date of Receipt MM / DD / YYYY 02 / 10 / 2014	
C. Mailing Address 941 LUCKNEY ROAD		Transaction ID : SA11AI.13445	
City BRANDON	State MS	Zip Code 39047	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Name of Employer UNEMPLOYED	
Occupation UNEMPLOYED		Election Cycle-to-Date 344.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

1402122410

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

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

FOR LINE NUMBER: PAGE 116 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
FRANCES PERKINS

Mailing Address **941 LUCKNEY ROAD**

City BRANDON	State MS	Zip Code 39047
------------------------	--------------------	--------------------------

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

Name of Employer UNEMPLOYED	Occupation UNEMPLOYED
---------------------------------------	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
594.00

Date of Receipt

MM	DD	YYYY
03	21	2014

Transaction ID : **SA11AI.15221**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
FRANCES PERKINS

Mailing Address **941 LUCKNEY ROAD**

City BRANDON	State MS	Zip Code 39047
------------------------	--------------------	--------------------------

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

Name of Employer UNEMPLOYED	Occupation UNEMPLOYED
---------------------------------------	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
619.00

Date of Receipt

MM	DD	YYYY
03	25	2014

Transaction ID : **SA11AI.15655**

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
FRANCES PERKINS

Mailing Address **941 LUCKNEY ROAD**

City BRANDON	State MS	Zip Code 39047
------------------------	--------------------	--------------------------

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

Name of Employer UNEMPLOYED	Occupation UNEMPLOYED
---------------------------------------	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
669.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.15656**

Amount of Each Receipt this Period
50.00

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

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

325.00

1402122411

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

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

FOR LINE NUMBER: PAGE 117 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SIDNEY PETERSEN

Mailing Address 1109 EMERALD BAY

City LAGUNA BEACH State CA Zip Code 92651

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.21116

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
JUDY PETTIT

Mailing Address 5118 GLEN VIEW PL

City BONITA State CA Zip Code 91902-2632

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.16815

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
STEVEN PFEIFER

Mailing Address 5531 LYNBROOK DRIVE

City HOUSTON State TX Zip Code 77056-2008

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

Name of Employer P.O.&G. RESOURCES Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.20624

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

3200.00

14021222412

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
STEVEN PFEIFER

A. Mailing Address **5531 LYNBROOK DRIVE**

City State Zip Code
HOUSTON TX 77056-2008

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

Name of Employer Occupation
P.O.&G. RESOURCES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 05 / 2014
 Transaction ID : **SA11AI.20625**

Amount of Each Receipt this Period
2600.00
 EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MITCHEL PLATT

B. Mailing Address **120 W SPARROW DR**

City State Zip Code
CHANDLER AZ 85286-8513

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 **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 08 / 2014
 Transaction ID : **SA11AI.22213**

Amount of Each Receipt this Period
2600.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
MITCHEL PLATT

C. Mailing Address **120 W SPARROW DR**

City State Zip Code
CHANDLER AZ 85286-8513

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 **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 08 / 2014
 Transaction ID : **SA11AI.23532**

Amount of Each Receipt this Period
1400.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

6600.00

14021222413

**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 119 OF 265
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	12 13a 13b 14

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEPHEN PLATT

Mailing Address **3604 AVENDALE DR**

City **BEE CAVE** State **TX** Zip Code **78738-5026**

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

Name of Employer **WENTWOOD MANAGEMENT** Occupation **REAL ESTATE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : **SA11AI.16103**

Amount of Each Receipt this Period
20.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
JOHN POPP

Mailing Address **12316 ABOITE CENTER ROAD**

City **FORT WAYNE** State **IN** Zip Code **46814-9725**

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

Name of Employer **PERFECTION BAKERIES, INC.** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.21042**

Amount of Each Receipt this Period
150.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
JACKYE POWELL

Mailing Address **19920 W VERDE HILLS DR**

City **WICKENBURG** State **AZ** Zip Code **85390-2069**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
02 / 25 / 2014

Transaction ID : **SA11AI.14324**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

420.00

14021222414

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

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

FOR LINE NUMBER: PAGE 120 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
SAMMY POWELL

A. Mailing Address **27 HUMMINGBIRD LANE**

City **LAUREL** State **MI** Zip Code **39443**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.15434**

Amount of Each Receipt this Period
2600.00

Full Name (Last, First, Middle Initial)
CHERRY PRATHER

B. Mailing Address **PO BOX 1877**

City **MADISON** State **MS** Zip Code **39130**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : **SA11AI.15563**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
MARY P. PRICE-MCLAURIN

C. Mailing Address **P.O. BOX 685**

City **RIDGELAND** State **MS** Zip Code **39158**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **SA11AI.20786**

Amount of Each Receipt this Period
500.00

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

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

3600.00

1402122415

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

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

FOR LINE NUMBER: PAGE 121 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
LENORA PUSTA

A. Mailing Address **138 W SUNFLOWER DRIVE**

City **PAYSON** State **AZ** Zip Code **85541**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
02 / 04 / 2014

Transaction ID : **SA11AI.13254**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
LENORA PUSTA

B. Mailing Address **138 W SUNFLOWER DRIVE**

City **PAYSON** State **AZ** Zip Code **85541**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
725.00

Date of Receipt
03 / 05 / 2014

Transaction ID : **SA11AI.20579**

Amount of Each Receipt this Period
425.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
LENORA PUSTA

C. Mailing Address **138 W SUNFLOWER DRIVE**

City **PAYSON** State **AZ** Zip Code **85541**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2125.00

Date of Receipt
03 / 28 / 2014

Transaction ID : **SA11AI.21143**

Amount of Each Receipt this Period
1400.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

1925.00

1402122416

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 122 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) B PUZISS		Date of Receipt MM / DD / YYYY 03 / 28 / 2014
Mailing Address 2209 NW EVERETT ST		Transaction ID : SA11AI.21220
City PORTLAND	State OR	Zip Code 97210
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer PUZISS INVESTMENTS	Occupation IT MANAGEMENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) JAMES RADLEY		Date of Receipt MM / DD / YYYY 01 / 22 / 2014
Mailing Address 10719 E RIMROCK DR		Transaction ID : SA11AI.18359
City SCOTTSDALE	State AZ	Zip Code 85255-7184
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2000.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH SENATE CONSERVATIVE FUND
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) JAMES REMINGTON		Date of Receipt MM / DD / YYYY 02 / 24 / 2014
Mailing Address 2300 CEDARFIELD PARKWAY APT. 263		Transaction ID : SA11AI.20492
City RICHMOND	State VA	Zip Code 23233-1942
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

1402122417

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

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

FOR LINE NUMBER: PAGE 123 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES REMINGTON

Mailing Address **2300 CEDARFIELD PARKWAY
APT. 263**

City **RICHMOND** State **VA** Zip Code **23233-1942**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014

Transaction ID : **SA11AI.23051**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES REMINGTON

Mailing Address **2300 CEDARFIELD PARKWAY
APT. 263**

City **RICHMOND** State **VA** Zip Code **23233-1942**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
MM / DD / YYYY
03 / 25 / 2014

Transaction ID : **SA11AI.23253**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
HOWARD RICH

Mailing Address **108 ARCH STREET, 1002**

City **PHILADELPHIA** State **PA** Zip Code **19106-2264**

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

Name of Employer **ALG** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **SA11AI.20587**

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

3600.00

1402122418

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

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

FOR LINE NUMBER: PAGE 124 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
BRIAN RICHARDSON

A. Mailing Address 1718 PORT BARMOUTH PL

City NEWPORT BEACH State CA Zip Code 92660-5313

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

Name of Employer FSWW, INC. Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
292.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2014

Transaction ID : SA11AI.16828

Amount of Each Receipt this Period
92.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

Full Name (Last, First, Middle Initial)
SAMUEL RICHARDSON

B. Mailing Address 114 KIMBERLY CT

City COLUMBIA State TN Zip Code 38401-6906

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : SA11AI.15091

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
JIM RIDGWAY

C. Mailing Address 102 COVINGTON BEND

City MADISON State MS Zip Code 39110

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2014

Transaction ID : SA11AI.15014

Amount of Each Receipt this Period
500.00

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

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

842.00

1402122419

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

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

FOR LINE NUMBER: PAGE 125 OF 265
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. S.S. RINDLAUB

Mailing Address **8441 SE 68TH STREET**
NO. 217

City **MERCER ISLAND** State **WA** Zip Code **98040**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.21463**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JON RIVERA

Mailing Address **3227 DIJON AVE**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 22 / 2014

Transaction ID : **SA11AI.13205**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JON RIVERA

Mailing Address **3227 DIJON AVE**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.21393**

Amount of Each Receipt this Period
100.00

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

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

1350.00

1402122420

**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 126 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
EDWARD ROBINSON

Mailing Address **P.O BOX 1120**

City **PARK CITY** State **UT** Zip Code **84060-1120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20600**

Amount of Each Receipt this Period
250.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
JOHN RODRIGUEZ

Mailing Address **2717 MARQUETTE AVE**

City **NATCHEZ** State **MS** Zip Code **39120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D / Y Y Y Y
01 / 23 / 2014

Transaction ID : **SA11AI.13207**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHNNY RODRIGUEZ

Mailing Address **2717 MARQUETTE AVE**

City **NATCHEZ** State **MS** Zip Code **39120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.15519**

Amount of Each Receipt this Period
250.00

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

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

750.00

1402122421

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

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

FOR LINE NUMBER: PAGE 127 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
DENNIS RONEY

A. Mailing Address **40 CALHOUN ESTATES RD.**

City LAUREL	State MS	Zip Code 39443
-----------------------	--------------------	--------------------------

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

Name of Employer SEACOR LIFTBOATS	Occupation BOAT CAPTAIN
---------------------------------------------	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.15688**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
LESLIE ROSE

B. Mailing Address **330 SOUTH OCEAN BOULEVARD**

City PALM BEACH	State FL	Zip Code 33480-4214
---------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

MM	DD	YYYY
03	11	2014

Transaction ID : **SA11AI.21342**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
LESLIE ROSE

C. Mailing Address **330 SOUTH OCEAN BOULEVARD**

City PALM BEACH	State FL	Zip Code 33480-4214
---------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.21415**

Amount of Each Receipt this Period
500.00

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

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

1600.00

1402122422

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ROBERT M ROUSE

Mailing Address 1260 FRESCHI LANE

City LINCOLN State CA Zip Code 95648

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20841

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
ROBERT ROWE

Mailing Address 2430 E ROSE AVE

City DES MOINES State IA Zip Code 50320-2235

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

Name of Employer NATIONWIDE INSURANCE CO. Occupation ACTUARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SA11AI.20082

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY H. RYAN

Mailing Address 83 DORCHESTER RD

City LYME State NH Zip Code 03768

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21315

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

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

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

1000.00

1402122423

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

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

FOR LINE NUMBER: PAGE 129 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MICHAEL RYDIN

Mailing Address **5500 HOLLY ST**

City **HOUSTON** State **TX** Zip Code **77081-7410**

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

Name of Employer **HCSS SUGAR LAND, TX** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt **MM / DD / YYYY**
02 / 12 / 2014

Transaction ID : **SA11AI.19535**

Amount of Each Receipt this Period **1600.00**

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
ANTHONY SAGES

Mailing Address **1633 BROADWAY**

City **NEW YORK** State **NY** Zip Code **10019**

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

Name of Employer **AXA-FINANCIAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **MM / DD / YYYY**
02 / 24 / 2014

Transaction ID : **SA11AI.20439**

Amount of Each Receipt this Period **300.00**

C. Full Name (Last, First, Middle Initial)
ANTHONY SAGES

Mailing Address **1633 BROADWAY**

City **NEW YORK** State **NY** Zip Code **10019**

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

Name of Employer **AXA-FINANCIAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt **MM / DD / YYYY**
02 / 24 / 2014

Transaction ID : **SA11AI.20440**

Amount of Each Receipt this Period **2600.00**

SUBTOTAL of Receipts This Page (optional)..... **4500.00**

TOTAL This Period (last page this line number only)..... **4500.00**

1402122424

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

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

FOR LINE NUMBER: PAGE 130 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANTHONY SAGES

Mailing Address **1633 BROADWAY**

City **NEW YORK** State **NY** Zip Code **10019**

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

Name of Employer **AXA-FINANCIAL** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **5000.00**

Date of Receipt
02 / 24 / 2014

Transaction ID : **SA11AI.81300**

Amount of Each Receipt this Period
2100.00

B. Full Name (Last, First, Middle Initial)
MR. DALE W. SALSGIVER

Mailing Address **PO BOX 205**

City **DAYTON** State **PA** Zip Code **16222-0205**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11AI.21290**

Amount of Each Receipt this Period
150.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
LORENE SARUWATARI

Mailing Address **512 LAUNA LN**

City **ARROYO GRANDE** State **CA** Zip Code **93420-3428**

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

Name of Employer **COASTAL PHOENIX INC** Occupation **OFFICE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
02 / 21 / 2014

Transaction ID : **SA11AI.23038**

Amount of Each Receipt this Period
500.00

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

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

2750.00

14021222425

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
MR. ROGER SAYLER

A. Mailing Address **59 WHITE FALL LANE**

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.20870**

City State Zip Code
NEW CANAAN CT 06840-2038

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

Amount of Each Receipt this Period

1200.00

EARMARKED THROUGH CLUB FOR GROWTH

Name of Employer Occupation
CHURCH PENSION GROUP INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

1200.00

B. Full Name (Last, First, Middle Initial)
MR. ROGER SAYLER

Mailing Address **59 WHITE FALL LANE**

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.20983**

City State Zip Code
NEW CANAAN CT 06840-2038

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

Amount of Each Receipt this Period

200.00

EARMARKED THROUGH CLUB FOR GROWTH

Name of Employer Occupation
CHURCH PENSION GROUP INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

1400.00

C. Full Name (Last, First, Middle Initial)
ROGER SCHALLER

Mailing Address **8210 LAKESHORE ROAD**

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.21069**

City State Zip Code
BURTCHVILLE MI 48059-1324

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

Amount of Each Receipt this Period

1000.00

EARMARKED THROUGH CLUB FOR GROWTH

Name of Employer Occupation
SCHALLER TOOL AND DIE CO. MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

2000.00

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

2400.00

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

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1402122426

**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 132 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
PAUL SCHIERL

A. Mailing Address **111 NORTH WASHINGTON STREET, SUITE**

City State Zip Code
GREEN BAY WI 54301-4257

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 **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014
 Transaction ID : **SA11AI.20605**

Amount of Each Receipt this Period
1300.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
ALEX SCHUETTENBERG

Mailing Address **2544 SE VICKSBURG ST**

City State Zip Code
BARTLESVILLE OK 74006

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 **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2014
 Transaction ID : **SA11AI.13153**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ALEX SCHUETTENBERG

Mailing Address **2544 SE VICKSBURG ST**

City State Zip Code
BARTLESVILLE OK 74006

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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2014
 Transaction ID : **SA11AI.15328**

Amount of Each Receipt this Period
1000.00

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

3300.00

1402122427

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
ALEX SCHUETTENBERG

Mailing Address **2544 SE VICKSBURG ST**

City State Zip Code
BARTLESVILLE OK 74006

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2600.00

Date of Receipt

MM / **DD** / **YYYY**
03 / **31** / **2014**

Transaction ID : **SA11AI.15823**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)
ALEX SCHUETTENBERG

Mailing Address **2544 SE VICKSBURG ST**

City State Zip Code
BARTLESVILLE OK 74006

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date
 3000.00

Date of Receipt

MM / **DD** / **YYYY**
03 / **31** / **2014**

Transaction ID : **SA11AI.23533**

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)
MR. WILLIAM SCHUMACHER

Mailing Address **120 VIEWCREST DRIVE**

City State Zip Code
CASTLE ROCK WA 98611

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 212.35

Date of Receipt

MM / **DD** / **YYYY**
01 / **22** / **2014**

Transaction ID : **SA11AI.23526**

Amount of Each Receipt this Period

212.35

In-kind - **BUTTONS**

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

1212.35

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

1402122428

**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 134 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JOHN SEIBOLD

Mailing Address **7000 PINE CANYON RD**

City **WASHOE VALLEY** State **NV** Zip Code **89704-9688**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SA11AI.14342**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C** **C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **126033.00**

Date of Receipt
MM / DD / YYYY
01 / 14 / 2014

Transaction ID : **SA11AI.23552**

Amount of Each Receipt this Period
15243.00

TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C** **C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **126033.00**

Date of Receipt
MM / DD / YYYY
01 / 22 / 2014

Transaction ID : **SA11AI.23546**

Amount of Each Receipt this Period
5409.00

TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]

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

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

100.00

1402122429

**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 135 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : **SA11AI.23547**

Amount of Each Receipt this Period
10822.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : **SA11AI.23548**

Amount of Each Receipt this Period
3670.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2014

Transaction ID : **SA11AI.23549**

Amount of Each Receipt this Period
11435.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

14021222430

**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 136 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
02 / 18 / 2014

Transaction ID : **SA11AI.23550**

Amount of Each Receipt this Period
5481.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
02 / 25 / 2014

Transaction ID : **SA11AI.23551**

Amount of Each Receipt this Period
12268.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
03 / 04 / 2014

Transaction ID : **SA11AI.23536**

Amount of Each Receipt this Period
11029.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122431

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

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

FOR LINE NUMBER: PAGE 137 OF 265
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.23537

Amount of Each Receipt this Period
330.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.23538

Amount of Each Receipt this Period
135.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.23539

Amount of Each Receipt this Period
310.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122432

**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 138 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.23540

Amount of Each Receipt this Period
 2600.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.23545

Amount of Each Receipt this Period
 15650.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address PO BOX 388

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 126033.00

Date of Receipt
 M M M / D D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.23544

Amount of Each Receipt this Period
 10598.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

1402122433

**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 139 OF 265
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SA11AI.23541**

Amount of Each Receipt this Period
95.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SA11AI.23542**

Amount of Each Receipt this Period
75.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
 MM / DD / YYYY
03 / 25 / 2014

Transaction ID : **SA11AI.23535**

Amount of Each Receipt this Period
8615.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

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

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

0.00

14021222434

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 OF 265

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

A. Mailing Address PO BOX 388

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : SA11AI.23543

Amount of Each Receipt this Period
320.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BRYAN SHAVER

Mailing Address 4482 STONE PARK BLVD

City State Zip Code
OLIVE BRANCH MI 38654

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

Name of Employer Occupation
INSURANCE CONSULTING GROUP INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.15574

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SHEPARD

Mailing Address 141 W JACKSON BLVD

City State Zip Code
CHICAGO IL 60604-2992

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
MM / DD / YYYY
01 / 09 / 2014

Transaction ID : SA11AI.21855

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

350.00

1402122435

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

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

FOR LINE NUMBER: PAGE 141 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
DARLENE SHOWS

Mailing Address P.O. BOX 331

City State Zip Code
ELLISVILLE MS 39437

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SA11AI.20444

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ALLEN SIMON

Mailing Address 1383 N CRISS ST

City State Zip Code
CHANDLER AZ 85226-1307

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
2600.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2014

Transaction ID : SA11AI.20526

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
CYNTHIA SLAUGHTER

Mailing Address 13 ORSINGER HL

City State Zip Code
SAN ANTONIO TX 78230-1500

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : SA11AI.16838

Amount of Each Receipt this Period
120.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

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

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

1370.00

1402122436

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 142 OF 265
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CYNTHIA SLAUGHTER

Mailing Address 13 ORSINGER HL

City State Zip Code
SAN ANTONIO TX 78230-1500

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2014

Transaction ID : SA11AI.21340

Amount of Each Receipt this Period
200.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
CYNTHIA SLAUGHTER

Mailing Address 13 ORSINGER HL

City State Zip Code
SAN ANTONIO TX 78230-1500

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
670.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2014

Transaction ID : SA11AI.13773

Amount of Each Receipt this Period
150.00
EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
BURR R. SMITH

Mailing Address 453 N LINDBERGH BLVD
FL 2

City State Zip Code
ST. LOUIS MO 63141-7840

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

Name of Employer Occupation
JEDFAM GROUP INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20998

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

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

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

2950.00

1402122437

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

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

FOR LINE NUMBER: PAGE 143 OF 265

(check only one)

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

CLARK SMITH

A.

Mailing Address 256 E. CENTER STREET

City State Zip Code
CANTON MS 39046

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2014

Transaction ID : SA11AI.13033

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAVID SMITH

B.

Mailing Address 5997 N GREENSBURG RD

City State Zip Code
SMITHDALE MS 39664

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
PINNACLE MEDICAL CLINIC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
315.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.15809

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

MS. DOROTHY DAVIS SMITH

C.

Mailing Address 453 NORTH LINDBERGH BOULEVARD
FLOOR 2

City State Zip Code
ST. LOUIS MO 63141-7840

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11AI.20994

Amount of Each Receipt this Period

2600.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

3300.00

TOTAL This Period (last page this line number only).....

1402122438

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 265
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES R. SMITH

Mailing Address P.O. BOX 381

City State Zip Code
MERIGOLD MS 38759

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MCCARTYS POTTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : SA11AI.15691

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
THOMAS W. SMITH

Mailing Address 2200 BUTTS RD. SUITE 320

City State Zip Code
BOCA RATON FL 33431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRESCOTT INVESTORS INC INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : SA11AI.20513

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SMITH

Mailing Address PO BOX 808

City State Zip Code
NEW CASTLE NH 03854-0808

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
500.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2014

Transaction ID : SA11AI.18188

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

1402122439

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 265
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
South Mississippi Surgeons PA

A. Mailing Address

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. **C** _____

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ 500.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2014

Transaction ID : SA11AI.21237

Amount of Each Receipt this Period
_____ 500.00

Full Name (Last, First, Middle Initial)
GRANT SOWELL

B. Mailing Address 213 N. THOMAS ST.

City TUPELO State MS Zip Code 38801

FEC ID number of contributing federal political committee. **C** _____

Name of Employer HERITAGE STONE Occupation ACCOUNT MANAGER

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ 265.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2014

Transaction ID : SA11AI.13224

Amount of Each Receipt this Period
_____ 130.00

Full Name (Last, First, Middle Initial)
GRANT SOWELL

C. Mailing Address 213 N. THOMAS ST.

City TUPELO State MS Zip Code 38801

FEC ID number of contributing federal political committee. **C** _____

Name of Employer HERITAGE STONE Occupation ACCOUNT MANAGER

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
_____ 365.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2014

Transaction ID : SA11AI.15694

Amount of Each Receipt this Period
_____ 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 730.00

1402122440

**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 146 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GRANT SOWELL

Mailing Address **213 N. THOMAS ST.**

City **TUPELO** State **MS** Zip Code **38801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HERITAGE STONE** Occupation **ACCOUNT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **465.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.15695**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
FORREST R. STANALAND

Mailing Address **300 COUNTY ROAD 2641**

City **GARRISON** State **TX** Zip Code **75946-7952**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20663**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JEFFREY STEINKAMP

Mailing Address **500 GREAT HAWK RD.
P.O. BOX 98**

City **ROCHESTER** State **VT** Zip Code **05767**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : **SA11AI.15802**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

14021222441

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 265
(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANGIE STEPHENS

Mailing Address **34 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ACCOUNTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
03 / 07 / 2014

Transaction ID : **SA11AI.21347**

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
ANGIE STEPHENS

Mailing Address **34 EDGEHILL ROAD**

City **LITTLE ROCK** State **AR** Zip Code **72207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ACCOUNTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
03 / 07 / 2014

Transaction ID : **SA11AI.21348**

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
JACKSON T STEPHENS JR.

Mailing Address **111 CENTER STREET
SUITE 1616**

City **LITTLE ROCK** State **AR** Zip Code **72201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EXOXEMIS, INC.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
03 / 12 / 2014

Transaction ID : **SA11AI.21109**

Amount of Each Receipt this Period
2600.00
EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

1402122442

**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 148 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JACKSON T STEPHENS JR.

Mailing Address **111 CENTER STREET
SUITE 1616**

City **LITTLE ROCK** State **AR** Zip Code **72201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EXOXEMIS, INC.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) **Runoff**

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : **SA11AI.21113**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
RUTH STEYN

Mailing Address **3356 WHIPPOORWILL LANE**

City **OXFORD** State **MS** Zip Code **38655-5311**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : **SA11AI.18933**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
RUTH STEYN

Mailing Address **3356 WHIPPOORWILL LANE**

City **OXFORD** State **MS** Zip Code **38655-5311**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : **SA11AI.15803**

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2660.00

1402122443

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)

<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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RUTH STEYN

Mailing Address **3356 WHIPPOORWILL LANE**

City OXFORD	State MS	Zip Code 38655-5311
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
345.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI.21067

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MS. VIRGINIA A. STICKELL

Mailing Address **3619 VICTORY AVE**

City LAS VEGAS	State NV	Zip Code 89121
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI.21012

Amount of Each Receipt this Period

1000.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MR. HUBERT STILES JR.

Mailing Address **915 ROLANDVUE RD.**

City TOWSON	State MD	Zip Code 21204-6814
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
203.00

Date of Receipt

MM	DD	YYYY
03	07	2014

Transaction ID : SA11AI.21354

Amount of Each Receipt this Period

203.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1303.00

1402122444

**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 150 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CHARLES STRAUCH		Date of Receipt MM / DD / YYYY 03 / 25 / 2014
Mailing Address 49 NORTH CAILBOGUE CAY ROAD		Transaction ID : SA11AI.15778
City HILTON HEAD ISLAND	State SC	Zip Code 29928
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer GA SERVICES LLC	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) JOSEPH STURKEY		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address PO BOX 28749		Transaction ID : SA11AI.20906
City SAN JOSE	State CA	Zip Code 95159-8749
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ACHIM SUIT		Date of Receipt MM / DD / YYYY 03 / 25 / 2014
Mailing Address 435 SANLENAY CT		Transaction ID : SA11AI.15781
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

14021222445

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 151 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) ACHIM SUIT		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 435 SANLENAY CT		Transaction ID : SA11AI.15389
City BILOXI	State MS	Zip Code 39531
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) ANDREW SULLIVAN		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 7748 WESTERN AVENUE		Transaction ID : SA11AI.20862
City OMAHA	State NE	Zip Code 68114-1760
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.00 EARMARKED THROUGH CLUB FOR GROWTH
Name of Employer MARRIOTT INTERNATIONAL	Occupation TECH SUPPORT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00	

Full Name (Last, First, Middle Initial) ANDREW SULLIVAN		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 7748 WESTERN AVENUE		Transaction ID : SA11AI.21163
City OMAHA	State NE	Zip Code 68114-1760
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00 EARMARKED THROUGH CLUB FOR GROWTH
Name of Employer MARRIOTT INTERNATIONAL	Occupation TECH SUPPORT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 255.00	

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

1402122446

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 265
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RAYMOND SUTER

Mailing Address **7010 NW 95TH AVE**

City **TAMARAC** State **FL** Zip Code **33321-3045**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
01 / 17 / 2014

Transaction ID : **SA11AI.17751**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
RAYMOND SUTER

Mailing Address **7010 NW 95TH AVE**

City **TAMARAC** State **FL** Zip Code **33321-3045**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
02 / 05 / 2014

Transaction ID : **SA11AI.18745**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
RAYMOND SUTER

Mailing Address **7010 NW 95TH AVE**

City **TAMARAC** State **FL** Zip Code **33321-3045**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
03 / 07 / 2014

Transaction ID : **SA11AI.16865**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

1402122447

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 265
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RAYMOND SUTER

Mailing Address **7010 NW 95TH AVE**

City **TAMARAC** State **FL** Zip Code **33321-3045**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt **03 / 13 / 2014**
Transaction ID : **SA11AI.15856**

Amount of Each Receipt this Period **25.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

B. Full Name (Last, First, Middle Initial)
KATHRYN SUTHARD

Mailing Address **2945 MANOR BRIDGE DRIVE**

City **ALPHARETTA** State **GA** Zip Code **30004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 11 / 2014**
Transaction ID : **SA11AI.14994**

Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
MS. JANE G SUTTON

Mailing Address **10 SAVOLLE CT**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VISION TOURS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.21378**

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1275.00**

TOTAL This Period (last page this line number only).....

14021222448

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 265
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GEORGE TASH

Mailing Address **5777 BALCOM CANYON RD.**

City **SOMIS** State **CA** Zip Code **93066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GT WATER PRODUCTS** Occupation **VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11AI.20497**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LEE TENZER

Mailing Address **9762 BENTGRASS BEND**

City **NAPLES** State **FL** Zip Code **34108-1933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **SA11AI.20979**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
KENNETH THOMPSON

Mailing Address **250 W 8TH ST**

City **CHULUOTA** State **FL** Zip Code **32766-8925**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENTREPRENEUR** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **286.00**

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **SA11AI.15341**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

1402122449

**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 155 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
TARZAN TREADWAY II

Mailing Address **1413 ASH ST.**

City OCEAN SPRINGS	State MS	Zip Code 39564
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HARD ROCK BILOXI	Occupation SLOT OPERATIONS MANAGER
---------------------------------------------	----------------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt

MM	DD	YYYY
02	13	2014

Transaction ID : **SA11AI.13584**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
RICK TRUSTY

Mailing Address **502 ASBURY LANE DR.**

City BRANDON	State MS	Zip Code 39042
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE TRUSTY COMPANY, INC.	Occupation INSURANCE BROKER
-----------------------------------------------------	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
01	23	2014

Transaction ID : **SA11AI.13209**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAN ULSTEEN

Mailing Address **9031 HANNAH LN**

City BILOXI	State MS	Zip Code 39532-7429
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INGALLS SHIPBUILDING	Occupation NAVAL ARCHITECT
-------------------------------------------------	--------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

MM	DD	YYYY
03	21	2014

Transaction ID : **SA11AI.13956**

Amount of Each Receipt this Period
400.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

1402122450

**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 156 OF 265	
	<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)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
VICTOR E VAN DAMME

Mailing Address **5113 PATRICIA AVE**

City LAS VEGAS	State NV	Zip Code 89130
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

MM	DD	YYYY
03	26	2014

Transaction ID : **SA11AI.23449**

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MICHAEL VICKERS

Mailing Address **PO BOX 591912**

City HOUSTON	State TX	Zip Code 77259-1912
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MARATHON PETROLEUM	Occupation CHEMICAL PROCESS TECH
-----------------------------------------------	--------------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

MM	DD	YYYY
01	14	2014

Transaction ID : **SA11AI.17692**

Amount of Each Receipt this Period
2000.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
OWEN VICKERS

Mailing Address **P.O. BOX 1596**

City BIRMINGHAM	State AL	Zip Code 35201
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BIRMINGHAM HIDE INC.	Occupation EXECTUVIE
-------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI.15452**

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4800.00

1402122451

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 157 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
T. VICKERS

A. Mailing Address **700 MAPLE STREET SUITE A**

City State Zip Code
BIRMINGHAM AL 35210-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BHT. INC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : **SA11AI.20557**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
B. CAROL WALTERS

Mailing Address **1311 AUGUSTA ROAD**

City State Zip Code
ELLISVILLE MS 39437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : **SA11AI.21199**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. MAREEN WATERMAN

Mailing Address **1 WATERMAN WAY**

City State Zip Code
QUEENSTOWN MD 21658-1179

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : **SA11AI.14825**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

1402122452

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 265

(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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MAREEN WATERMAN

Mailing Address **1 WATERMAN WAY**

City **QUEENSTOWN** State **MD** Zip Code **21658-1179**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **SA11AI.20855**

Amount of Each Receipt this Period **500.00**
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
STEVE WELKER

Mailing Address **10155 GROVE LN**

City **COOPER CITY** State **FL** Zip Code **33328-4008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **203.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : **SA11AI.19603**

Amount of Each Receipt this Period **50.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
STEVE WELKER

Mailing Address **10155 GROVE LN**

City **COOPER CITY** State **FL** Zip Code **33328-4008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **248.00**

Date of Receipt **03 / 05 / 2014**
Transaction ID : **SA11AI.16846**

Amount of Each Receipt this Period **45.00**
EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional)..... **595.00**

TOTAL This Period (last page this line number only).....

1402122453

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 265
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEVE WELKER

Mailing Address 10155 GROVE LN

City COOPER CITY State FL Zip Code 33328-4008

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 298.00

Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.20953

Amount of Each Receipt this Period 50.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MS. PAMELA B. WEST

Mailing Address 1 ASHTON COURT

City LAUREL State MS Zip Code 39440

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 03 / 24 / 2014
Transaction ID : SA11AI.20706

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
WALTER WHITE

Mailing Address 13411 KIMBERLEY LANE

City HOUSTON State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C**

Name of Employer ECONOMY MUD PRODUCTS Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt 01 / 10 / 2014
Transaction ID : SA11AI.13013

Amount of Each Receipt this Period 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3150.00

1402122454

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ROBERT E WILLIFORD

Mailing Address **303 HIGHLAND PARK CV STE A**

City **RIDGELAND** State **MS** Zip Code **39157**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILLIFORD, MCALLISTER, AND JAC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : **SA11AI.21246**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DANIEL SCOTT WILSON

Mailing Address **P.O. BOX 2034**

City **LAUREL** State **MS** Zip Code **39442-2034**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2014

Transaction ID : **SA11AI.22858**

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
DANIEL SCOTT WILSON

Mailing Address **P.O. BOX 2034**

City **LAUREL** State **MS** Zip Code **39442-2034**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : **SA11AI.21030**

Amount of Each Receipt this Period
100.00
EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

1402122455

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. GEORGE DAVID WILSON

Mailing Address **50878 BABEL SLOUGH RD**

City **CLARKSBURG** State **CA** Zip Code **95612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILSON FARMS** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 28 / 2014

Transaction ID : **SA11AI.21149**

Amount of Each Receipt this Period
500.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
PATTE WINN

Mailing Address **26 BLACKBERRY LANE**

City **MORTON** State **IL** Zip Code **61550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
03 / 20 / 2014

Transaction ID : **SA11AI.15189**

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BARBARA WINTERLAND

Mailing Address **PO BOX 212**

City **FAIRBURY** State **IL** Zip Code **61739**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
03 / 12 / 2014

Transaction ID : **SA11AI.21103**

Amount of Each Receipt this Period
500.00
 EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

1402122456

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES WINTERSTEEN

Mailing Address **27 MYRTLE AVENUE**

City **MILL VALLEY** State **CA** Zip Code **94941-1023**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
5200.00

Date of Receipt
03 / **10** / **2014**

Transaction ID : **SA11AI.21170**

Amount of Each Receipt this Period
1200.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MARLENE WISE

Mailing Address **1002 WOODLAND WAY**

City **RICHARDSON** State **TX** Zip Code **75080-4030**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
02 / **07** / **2014**

Transaction ID : **SA11AI.19298**

Amount of Each Receipt this Period
100.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

C. Full Name (Last, First, Middle Initial)
JERRY DONALD WOODS

Mailing Address **21 THORNGATE DR**

City **BRANDON** State **MS** Zip Code **39042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EXTREME AUTO WORLD** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
03 / **07** / **2014**

Transaction ID : **SA11AI.23187**

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

1402122457

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 265
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANDREW WYLY

Mailing Address **300 CRESCENT COURT SUITE 1000**

City **DALLAS** State **TX** Zip Code **75201-7852**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ANDREW WYLY FILM CO.** Occupation **FILM MAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
03 / 05 / 2014

Transaction ID : **SA11AI.20643**

Amount of Each Receipt this Period
300.00
 EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
LEW YODER

Mailing Address **P.O. BOX 1842**

City **LAUREL** State **MS** Zip Code **39441**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GILCHRIST SUMRALL YODER** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
01 / 06 / 2014

Transaction ID : **SA11AI.13039**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LAURA ZULUETA

Mailing Address **2008 GREYHAWK PL**

City **APEX** State **NC** Zip Code **27539-9309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
01 / 21 / 2014

Transaction ID : **SA11AI.17985**

Amount of Each Receipt this Period
100.00
 EARMARKED THROUGH SENATE CONSERVATIVE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

275073.35

14021222458

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 265
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
CAMPAIGN FOR WORKING FAMILIES

A. Mailing Address **2800 SHIRLINGTON ROAD, SUITE 930**

City ARLINGTON	State VA	Zip Code 22206
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00325076**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SA11C.20732**

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

B. Mailing Address **1006 PENNSYLVANIA AVE SE**

City WASHINGTON	State DC	Zip Code 20003
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00295527**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11C.20521**

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

C. Mailing Address **1006 PENNSYLVANIA AVE SE**

City WASHINGTON	State DC	Zip Code 20003
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00295527**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **SA11C.20522**

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

15000.00

14021222459

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 OF 265

(check only one)

<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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
EAGLE FORUM PAC

Mailing Address P.O. BOX 618

City ALTON State IL Zip Code 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : SA11C.21490

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
OUR COUNTRY DESERVES BETTER PAC - TEAPARTYEXPRESS.ORG

Mailing Address PO BOX 984

City WILLOWS State CA Zip Code 95988

FEC ID number of contributing federal political committee. **C** C00454074

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11C.20734

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
SARAH PAC

Mailing Address PO BOX 7711

City ARLINGTON State VA Zip Code 22207

FEC ID number of contributing federal political committee. **C** C00458588

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2014

Transaction ID : SA11C.20757

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12000.00

14021222460

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 265
(check only one)

<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	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
THE TEA PARTY LEADERSHIP FUND

Mailing Address **717 KING STREET
SUITE 300**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00520825**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11C.20740**

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY INC.'S LIBERTY ACTION FUND

Mailing Address **3030 CLARENDON BLVD SUITE 200**

City **ARLINGTON** State **VA** Zip Code **22201**

FEC ID number of contributing federal political committee. **C C00508739**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
653.00

Date of Receipt
03 / 24 / 2014

Transaction ID : **SA11C.20748**

Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY INC.'S LIBERTY ACTION FUND

Mailing Address **3030 CLARENDON BLVD SUITE 200**

City **ARLINGTON** State **VA** Zip Code **22201**

FEC ID number of contributing federal political committee. **C C00508739**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
678.00

Date of Receipt
03 / 31 / 2014

Transaction ID : **SA11C.21418**

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5575.00

32575.00

1402122461

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. ABE'S TRANSPORTATION

Mailing Address **2500 CALVERT ST NW**

City **WASHINGTON** State **DC** Zip Code **20008**

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	12	2014

Amount of Each Disbursement this Period

244.00

Transaction ID : **SB17.12524**

Full Name (Last, First, Middle Initial)
B. DON ABERNATHY

Mailing Address **P.O. BOX 125**

City **LAUREL** State **MS** Zip Code **39441**

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	04	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : **SB17.12611**

Full Name (Last, First, Middle Initial)
C. DON ABERNATHY

Mailing Address **P.O. BOX 125**

City **LAUREL** State **MS** Zip Code **39441**

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	15	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : **SB17.12612**

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2244.00

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14021222462

**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 168 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. AIRTRAN AIRWAYS		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 9955 AIRTRAN BLVD		Amount of Each Disbursement this Period 328.00 Transaction ID : SB17.12526
City ORLANDO	State FL	
Zip Code 32827	Purpose of Disbursement TRAVEL: AIR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AIRTRAN AIRWAYS		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 9955 AIRTRAN BLVD		Amount of Each Disbursement this Period 328.00 Transaction ID : SB17.12527
City ORLANDO	State FL	
Zip Code 32827	Purpose of Disbursement TRAVEL: AIR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AIRTRAN AIRWAYS		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 9955 AIRTRAN BLVD		Amount of Each Disbursement this Period 328.00 Transaction ID : SB17.12528
City ORLANDO	State FL	
Zip Code 32827	Purpose of Disbursement TRAVEL: AIR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

984.00

1402122463

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. KENT ALEXANDER		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 22116 YANKEE TOWN RD		Amount of Each Disbursement this Period 2357.19
City SAUCES State MS Zip Code 39474	Purpose of Disbursement PAYROLL	Transaction ID : SB17.12688
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. KENT ALEXANDER		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 22116 YANKEE TOWN RD		Amount of Each Disbursement this Period 21.00
City SAUCES State MS Zip Code 39474	Purpose of Disbursement PAYROLL	Transaction ID : SB17.12689
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. KENT ALEXANDER		Date of Disbursement MM / DD / YYYY 02 / 15 / 2014
Mailing Address 22116 YANKEE TOWN RD		Amount of Each Disbursement this Period 2357.19
City SAUCES State MS Zip Code 39474	Purpose of Disbursement PAYROLL	Transaction ID : SB17.12690
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4735.38

1402122464

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. BANCOS SOUTH CONFERENCE CENTER

Mailing Address 375 E MAIN STREET

City TUPELO State MS Zip Code 38804

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

1537.63

Transaction ID : SB17.12536

Full Name (Last, First, Middle Initial)
B. BC PROPERTIES, LLC

Mailing Address P.O. BOX 1409

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 10 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.12538

Full Name (Last, First, Middle Initial)
C. BIGEYE DIRECT

Mailing Address 13860 REDSKIN DRIVE

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

-16.57

Transaction ID : SB17.12939

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3521.06

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1402122465

**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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<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. BIGEYE DIRECT		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014	
Mailing Address 13860 REDSKIN DRIVE		Amount of Each Disbursement this Period 709.94	
City HERNDON	State VA	Zip Code 20171	Transaction ID : SB17.12940
Purpose of Disbursement PRINTING AND MAILSHOP		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. BIGEYE DIRECT		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014	
Mailing Address 13860 REDSKIN DRIVE		Amount of Each Disbursement this Period 6.63	
City HERNDON	State VA	Zip Code 20171	Transaction ID : SB17.12941
Purpose of Disbursement SHIPPING EXPENSE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. BIGEYE DIRECT		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014	
Mailing Address 13860 REDSKIN DRIVE		Amount of Each Disbursement this Period -8.43	
City HERNDON	State VA	Zip Code 20171	Transaction ID : SB17.12948
Purpose of Disbursement POSTAGE & DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	708.14
TOTAL This Period (last page this line number only).....	

14021222466

**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 172 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. BIGEYE DIRECT		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 13860 REDSKIN DRIVE		Amount of Each Disbursement this Period 864.37 Transaction ID : SB17.12949
City HERNDON	State VA	
Purpose of Disbursement PRINTING AND MAILSHOP		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. BIGEYE DIRECT		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 13860 REDSKIN DRIVE		Amount of Each Disbursement this Period 3.37 Transaction ID : SB17.12950
City HERNDON	State VA	
Purpose of Disbursement SHIPPING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. JEREMIAH BODDY		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12668
City LAUREL	State MS	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....

864.37

TOTAL This Period (last page this line number only).....

1402122467

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. JEREMIAH BODDY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : SB17.12669

Full Name (Last, First, Middle Initial)
B. KENNY BOONE

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.12686

Full Name (Last, First, Middle Initial)
C. KENNY BOONE

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.12687

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

14021222468

**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)
FRIENDS OF CHRIS MCDANIEL

A. SCOTT BREWSTER

Full Name (Last, First, Middle Initial)
Mailing Address 806 HIGHLAND COURT

City BRANDON State MS Zip Code 39047

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 15 / 2014

Amount of Each Disbursement this Period
2500.00

Transaction ID : SB17.12806

Category/Type

B. SCOTT BREWSTER

Full Name (Last, First, Middle Initial)
Mailing Address 806 HIGHLAND COURT

City BRANDON State MS Zip Code 39047

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 14 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.12807

Category/Type

C. SCOTT BREWSTER

Full Name (Last, First, Middle Initial)
Mailing Address 806 HIGHLAND COURT

City BRANDON State MS Zip Code 39047

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.12808

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

14021222469

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. RICHARD BURKE

Full Name (Last, First, Middle Initial)

Mailing Address 115 WEIR CT

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.12796

B. RICHARD BURKE

Full Name (Last, First, Middle Initial)

Mailing Address 115 WEIR CT

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.12797

C. KEVIN BURR

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.12692

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

14021222470

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. KEVIN BURR		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 413.60	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12693
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. KEVIN BURR		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 1000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12694
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. BWC PHONEBOOTH		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014	
Mailing Address 809 TATE STREET		Amount of Each Disbursement this Period 72.52	
City CORINTH	State MS	Zip Code 38834	Transaction ID : SB17.12547
Purpose of Disbursement MOBILE PHONE EXPENSE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1486.12
TOTAL This Period (last page this line number only).....	

14021222471

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. CAMPAIGN RESEARCH ASSOC., LLC

Mailing Address 6582 IRVINE CT

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	19	2014

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.12548

Full Name (Last, First, Middle Initial)
B. THERESA CARDENES

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	15	2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.12853

Full Name (Last, First, Middle Initial)
C. CRAIG CHESEK

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	04	2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.12581

SUBTOTAL of Disbursements This Page (optional).....

11500.00

TOTAL This Period (last page this line number only).....

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1402122472

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CRAIG CHESEK		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.12582
City LAUREL	State MS	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. CHEVRON		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 55.01 Transaction ID : SB17.12551
City SAN RAMON	State CA	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. CHEVRON		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.12552
City SAN RAMON	State CA	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	2680.01
TOTAL This Period (last page this line number only).....	

14021222473

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. CHEVRON

Full Name (Last, First, Middle Initial)

Mailing Address 6001 BOLLINGER CANYON ROAD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2014

Amount of Each Disbursement this Period: 125.00

Transaction ID : SB17.12553

Category/Type

B. CHEVRON

Full Name (Last, First, Middle Initial)

Mailing Address 6001 BOLLINGER CANYON ROAD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 27 / 2014

Amount of Each Disbursement this Period: 115.45

Transaction ID : SB17.12554

Category/Type

C. CHEVRON

Full Name (Last, First, Middle Initial)

Mailing Address 6001 BOLLINGER CANYON ROAD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 18 / 2014

Amount of Each Disbursement this Period: 125.00

Transaction ID : SB17.12555

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

365.45

14021222A7A

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 62.00	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12556
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 76.60	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12557
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 32.41	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12558
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

171.01

14021222475

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 125.00	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12559
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 125.00	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12560
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014	
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 48.06	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB17.12561
Purpose of Disbursement TRAVEL: FUEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....

298.06

TOTAL This Period (last page this line number only).....

1402122476

**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 182 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CHEVRON		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 6001 BOLLINGER CANYON ROAD		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.12562
City SAN RAMON	State CA	
Zip Code 94583	Purpose of Disbursement TRAVEL: FUEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 201 L STREET NW		Amount of Each Disbursement this Period 149.12 Transaction ID : SB17.12917
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 201 L STREET NW		Amount of Each Disbursement this Period 177.99 Transaction ID : SB17.12918
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MERCHANT FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	452.11
TOTAL This Period (last page this line number only).....	

1402122477

**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 183 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.12919

Full Name (Last, First, Middle Initial)
B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.12920

Full Name (Last, First, Middle Initial)
C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Transaction ID : SB17.12921

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021222478

**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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<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CLUB FOR GROWTH		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 201 L STREET NW		Amount of Each Disbursement this Period 231.12 Transaction ID : SB17.12922
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	Zip Code 20006	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. CLUB FOR GROWTH		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 201 L STREET NW		Amount of Each Disbursement this Period 51.87 Transaction ID : SB17.12923
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	Zip Code 20006	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. CLUB FOR GROWTH		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 201 L STREET NW		Amount of Each Disbursement this Period 176.25 Transaction ID : SB17.12924
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	Zip Code 20006	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	459.24
TOTAL This Period (last page this line number only).....	

14021222479

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

Amount of Each Disbursement this Period

318.12

Transaction ID : SB17.12925

Full Name (Last, First, Middle Initial)

B. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	24	2014

Amount of Each Disbursement this Period

1086.60

Transaction ID : SB17.12571

Full Name (Last, First, Middle Initial)

C. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	24	2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.12572

SUBTOTAL of Disbursements This Page (optional).....

6404.72

TOTAL This Period (last page this line number only).....

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14021222480

**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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<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. COLD SPARK MEDIA		Date of Disbursement MM / DD / YYYY 02 / 02 / 2014
Mailing Address 307 FOURTH AVE SUITE 920		Amount of Each Disbursement this Period 786.45 Transaction ID : SB17.12573
City PITTSBURGH	State PA	
Purpose of Disbursement PRINTING SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. COLD SPARK MEDIA		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 307 FOURTH AVE SUITE 920		Amount of Each Disbursement this Period 1159.97 Transaction ID : SB17.12574
City PITTSBURGH	State PA	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. COLD SPARK MEDIA		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 307 FOURTH AVE SUITE 920		Amount of Each Disbursement this Period 1193.32 Transaction ID : SB17.12575
City PITTSBURGH	State PA	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3139.74

14021222481

**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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<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. COLD SPARK MEDIA		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 307 FOURTH AVE SUITE 920		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.12576
City PITTSBURGH	State PA	
Purpose of Disbursement STRATEGY CONSULTING	Zip Code 15222	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COLD SPARK MEDIA		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 307 FOURTH AVE SUITE 920		Amount of Each Disbursement this Period 7103.57 Transaction ID : SB17.12577
City PITTSBURGH	State PA	
Purpose of Disbursement MEDIA PRODUCTION	Zip Code 15222	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. COLORTREE GROUP INC		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 8000 VILLA PARK DR		Amount of Each Disbursement this Period 2653.56 Transaction ID : SB17.12943
City RICHMOND	State VA	
Purpose of Disbursement PRINTING AND MAILSHOP	Zip Code 23228	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

14757.13

TOTAL This Period (last page this line number only).....

1402122482

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. COUNTRY CREEK RV SUPER CENTER

Mailing Address 7696 U S HIGHWAY 49

City HATTIESBURG State MS Zip Code 39402

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	08	2014

Amount of Each Disbursement this Period

2153.48

Transaction ID : SB17.12579

Full Name (Last, First, Middle Initial)
B. GLEN CRANE

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
EVENT CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	11	2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.12656

Full Name (Last, First, Middle Initial)
C. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
COMPUTER EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	20	2014

Amount of Each Disbursement this Period

177.89

Transaction ID : SB17.12583

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2631.37

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1402122483

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CREATIVE COMPUTER		Date of Disbursement						
Mailing Address P.O. BOX 6648		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>02</td><td>02</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	02	02	2014
M M	D D	Y Y Y Y						
02	02	2014						
City LAUREL	State MS	Zip Code 39441						
Purpose of Disbursement COMPUTER EXPENSE		Amount of Each Disbursement this Period <table border="1"><tr><td>9746.37</td></tr></table>	9746.37					
9746.37								
Candidate Name		Transaction ID : SB17.12584						
Office Sought: <table border="1"><tr><td>House</td></tr><tr><td>Senate</td></tr><tr><td>President</td></tr></table>	House	Senate	President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type			
House								
Senate								
President								
State: District:								

Full Name (Last, First, Middle Initial) B. CREATIVE COMPUTER		Date of Disbursement						
Mailing Address P.O. BOX 6648		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>04</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	04	2014
M M	D D	Y Y Y Y						
03	04	2014						
City LAUREL	State MS	Zip Code 39441						
Purpose of Disbursement COMPUTER EXPENSE		Amount of Each Disbursement this Period <table border="1"><tr><td>50.83</td></tr></table>	50.83					
50.83								
Candidate Name		Transaction ID : SB17.12585						
Office Sought: <table border="1"><tr><td>House</td></tr><tr><td>Senate</td></tr><tr><td>President</td></tr></table>	House	Senate	President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type			
House								
Senate								
President								
State: District:								

Full Name (Last, First, Middle Initial) C. CREATIVE COMPUTER		Date of Disbursement						
Mailing Address P.O. BOX 6648		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>04</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	04	2014
M M	D D	Y Y Y Y						
03	04	2014						
City LAUREL	State MS	Zip Code 39441						
Purpose of Disbursement COMPUTER EXPENSE		Amount of Each Disbursement this Period <table border="1"><tr><td>53.50</td></tr></table>	53.50					
53.50								
Candidate Name		Transaction ID : SB17.12586						
Office Sought: <table border="1"><tr><td>House</td></tr><tr><td>Senate</td></tr><tr><td>President</td></tr></table>	House	Senate	President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type			
House								
Senate								
President								
State: District:								

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

9850.70

1402122484

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
COMPUTER EXPENSE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

2952.41

Transaction ID : SB17.12587

Full Name (Last, First, Middle Initial)
B. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
COMPUTER EXPENSE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

1777.28

Transaction ID : SB17.12588

Full Name (Last, First, Middle Initial)
C. DALLAS PRINTING

Mailing Address 2201 MAIN ST #810

City State Zip Code
DALLAS TX 75201

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

671.74

Transaction ID : SB17.12590

SUBTOTAL of Disbursements This Page (optional).....

2952.41

TOTAL This Period (last page this line number only).....

14021222485

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. DELTA AIR LINES, INC.

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2014

Amount of Each Disbursement this Period

464.00

Transaction ID : SB17.12600

Full Name (Last, First, Middle Initial)
B. DELTA AIR LINES, INC.

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2014

Amount of Each Disbursement this Period

234.00

Transaction ID : SB17.12601

Full Name (Last, First, Middle Initial)
C. DELTA AIR LINES, INC.

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2014

Amount of Each Disbursement this Period

396.00

Transaction ID : SB17.12602

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1094.00

14021222486

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014	
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 396.00	
City ATLANTA	State GA	Zip Code 30354	Transaction ID : SB17.12603
Purpose of Disbursement TRAVEL: AIR	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. DELTA AIR LINES, INC.		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014	
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 396.00	
City ATLANTA	State GA	Zip Code 30354	Transaction ID : SB17.12604
Purpose of Disbursement TRAVEL: AIR	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. DIGNITARY SERVICES LLC		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014	
Mailing Address 23142 SANDALFOOT PLAZA DR		Amount of Each Disbursement this Period 218.00	
City BOCA RATON	State FL	Zip Code 33428	Transaction ID : SB17.12606
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1010.00

14021222487

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. DIGNITARY SERVICES LLC		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 23142 SANDALFOOT PLAZA DR		Amount of Each Disbursement this Period 50.00
City BOCA RATON	State FL	Zip Code 33428
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Category/Type	
Candidate Name	Transaction ID : SB17.12607	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DONORBUREAU		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 1900 N CULPEPER ST		Amount of Each Disbursement this Period 293.31
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement STATISTICAL MODELING	Category/Type	
Candidate Name	Transaction ID : SB17.12952	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ENTERPRISE RENT-A-CAR		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 3621 BLUE HERON BLVD W		Amount of Each Disbursement this Period 577.67
City RIVIERA BEACH	State FL	Zip Code 33404-4901
Purpose of Disbursement TRAVEL: CAR RENTAL	Category/Type	
Candidate Name	Transaction ID : SB17.12622	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....
TOTAL This Period (last page this line number only).....

920.98

14021222488

**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 194 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

A. ENTERPRISE RENT-A-CAR

Full Name (Last, First, Middle Initial)

Mailing Address 3621 BLUE HERON BLVD W

City RIVIERA BEACH State FL Zip Code 33404-4901

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 13 / 2014

Amount of Each Disbursement this Period

138.74

Transaction ID : SB17.12623

B. EXPEDIA, INC

Full Name (Last, First, Middle Initial)

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 31 / 2014

Amount of Each Disbursement this Period

369.68

Transaction ID : SB17.12632

C. EXXONMOBIL

Full Name (Last, First, Middle Initial)

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039-2298

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 22 / 2014

Amount of Each Disbursement this Period

180.84

Transaction ID : SB17.12635

SUBTOTAL of Disbursements This Page (optional).....

689.26

TOTAL This Period (last page this line number only).....

1402122489

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. EXXONMOBIL

Full Name (Last, First, Middle Initial)

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039-2298

Purpose of Disbursement TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period: 209.28

Transaction ID : SB17.12636

Category/Type

B. EXXONMOBIL

Full Name (Last, First, Middle Initial)

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039-2298

Purpose of Disbursement TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 25 / 2014

Amount of Each Disbursement this Period: 272.31

Transaction ID : SB17.12637

Category/Type

C. FACEBOOK INC.

Full Name (Last, First, Middle Initial)

Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 10 / 2014

Amount of Each Disbursement this Period: 250.14

Transaction ID : SB17.12642

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

731.73

1402122490

**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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<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)
FRIENDS OF CHRIS MCDANIEL

A. FACEBOOK INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	14	2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.12643

Category/
Type

B. FACEBOOK INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.12644

Category/
Type

C. FACEBOOK INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.12645

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

1402122491

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

502.31

Transaction ID : SB17.12646

Full Name (Last, First, Middle Initial)
B. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	06	2014

Amount of Each Disbursement this Period

755.83

Transaction ID : SB17.12647

Full Name (Last, First, Middle Initial)
C. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	17	2014

Amount of Each Disbursement this Period

750.61

Transaction ID : SB17.12648

SUBTOTAL of Disbursements This Page (optional).....

2008.75

TOTAL This Period (last page this line number only).....

14021222492

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	26	2014

Amount of Each Disbursement this Period

750.95

Transaction ID : SB17.12649

Category/
Type

Full Name (Last, First, Middle Initial)
B. FAST TRACK

Mailing Address 306 N FRONT STREET

City SANDERSVILLE State MS Zip Code 39477

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	22	2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.12650

Category/
Type

Full Name (Last, First, Middle Initial)
C. FAST TRACK

Mailing Address 306 N FRONT STREET

City SANDERSVILLE State MS Zip Code 39477

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	31	2014

Amount of Each Disbursement this Period

28.00

Transaction ID : SB17.12651

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

878.95

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14021222493

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. FAST TRACK		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 306 N FRONT STREET		Amount of Each Disbursement this Period 50.98 Transaction ID : SB17.12652
City SANDERSVILLE	State MS Zip Code 39477	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12734
City JACKSON	State MS Zip Code 39211	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 3673.12 Transaction ID : SB17.12735
City JACKSON	State MS Zip Code 39211	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....
TOTAL This Period (last page this line number only).....

4224.10

140212249A

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014	
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 2000.00	
City JACKSON	State MS	Zip Code 39211	Transaction ID : SB17.12736
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014	
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 795.60	
City JACKSON	State MS	Zip Code 39211	Transaction ID : SB17.12737
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 02 / 15 / 2014	
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 3673.12	
City JACKSON	State MS	Zip Code 39211	Transaction ID : SB17.12738
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....

6468.72

TOTAL This Period (last page this line number only).....

1402122495

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.12739
City JACKSON State MS Zip Code 39211	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12740
City JACKSON State MS Zip Code 39211	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NOEL W FRITSCH		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 5364 SUFFOLK DRIVE		Amount of Each Disbursement this Period 3673.12 Transaction ID : SB17.12741
City JACKSON State MS Zip Code 39211	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4498.12

1402122496

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. STEPHEN FURNEY		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 2500.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12827
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. STEPHEN FURNEY		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 2500.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12828
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. GINOSI APARTMENTS		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014	
Mailing Address 655 NORTH CENTRAL AVENUE		Amount of Each Disbursement this Period 503.58	
City GLENDALE	State CA	Zip Code 91203	Transaction ID : SB17.12654
Purpose of Disbursement RENT & UTILITIES	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	5503.58
TOTAL This Period (last page this line number only).....	

1402122497

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. GLOBAL PAYMENTS		Date of Disbursement
Mailing Address 10705 RED RUN BLVD		MM / DD / YYYY 03 / 25 / 2014
City ROCKVILLE	State MD	Zip Code 20855
Purpose of Disbursement CREDIT CARD FEES	Category/ Type	Amount of Each Disbursement this Period 80.21
Candidate Name	Transaction ID : SB17.12968	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LARRY GOFF		Date of Disbursement
Mailing Address P.O. BOX 544		MM / DD / YYYY 01 / 15 / 2014
City ELLISVILLE	State MS	Zip Code 39437
Purpose of Disbursement PAYROLL	Category/ Type	Amount of Each Disbursement this Period 2500.00
Candidate Name	Transaction ID : SB17.12700	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LARRY GOFF		Date of Disbursement
Mailing Address P.O. BOX 544		MM / DD / YYYY 02 / 14 / 2014
City ELLISVILLE	State MS	Zip Code 39437
Purpose of Disbursement PAYROLL	Category/ Type	Amount of Each Disbursement this Period 2500.00
Candidate Name	Transaction ID : SB17.12701	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5080.21
TOTAL This Period (last page this line number only).....	

1402122498

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. LARRY GOFF		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address P.O. BOX 544		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12702
City ELLISVILLE	State MS	
Zip Code 39437	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LARRY GOFF		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address P.O. BOX 544		Amount of Each Disbursement this Period 1258.09 Transaction ID : SB17.12703
City ELLISVILLE	State MS	
Zip Code 39437	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LARRY GOFF		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address P.O. BOX 544		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.12704
City ELLISVILLE	State MS	
Zip Code 39437	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4258.09
TOTAL This Period (last page this line number only).....	

1402122499

**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 205 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. MARY E HAMIL		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 169 OLD HWY 15 SOUTH		Amount of Each Disbursement this Period 1616.12 Transaction ID : SB17.12712
City ELLISVILLE	State MS	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARY E HAMIL		Date of Disbursement MM / DD / YYYY 02 / 15 / 2014
Mailing Address 169 OLD HWY 15 SOUTH		Amount of Each Disbursement this Period 1616.13 Transaction ID : SB17.12713
City ELLISVILLE	State MS	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MARY E HAMIL		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 169 OLD HWY 15 SOUTH		Amount of Each Disbursement this Period 1616.12 Transaction ID : SB17.12714
City ELLISVILLE	State MS	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

4848.37

TOTAL This Period (last page this line number only).....

1402122500

**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 206 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

A. ALLEN HAMILTON

Full Name (Last, First, Middle Initial)

Mailing Address 6000 POLLOCK FERRY RD

City MOSS POINT State MS Zip Code 39562

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.12529

B. ALLEN HAMILTON

Full Name (Last, First, Middle Initial)

Mailing Address 6000 POLLOCK FERRY RD

City MOSS POINT State MS Zip Code 39562

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.12530

C. ALLEN HAMILTON

Full Name (Last, First, Middle Initial)

Mailing Address 6000 POLLOCK FERRY RD

City MOSS POINT State MS Zip Code 39562

Purpose of Disbursement TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period

337.60

Transaction ID : SB17.12531

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2337.60

1402122501

**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 207 OF 265

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. ALLEN HAMILTON		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 6000 POLLOCK FERRY RD		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12532
City MOSS POINT	State MS	
Zip Code 39562	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HAPPY CATFISH		Date of Disbursement MM / DD / YYYY 01 / 09 / 2014
Mailing Address 72 TECHNOLOGY BLVD		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.12661
City ELLISVILLE	State MS	
Zip Code 39437	Purpose of Disbursement CATERING/FACILITY RENTAL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HSP DIRECT		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 13755 SUNRISE VALLEY DR. STE 450		Amount of Each Disbursement this Period 2975.00 Transaction ID : SB17.12954
City HERNDON	State VA	
Zip Code 20171	Purpose of Disbursement CREATIVE FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....

6975.00

TOTAL This Period (last page this line number only).....

1402122502

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. IMAGE DIRECT		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 200 MONROE AVENUE BUILDING 4		Amount of Each Disbursement this Period 2200.00 Transaction ID : SB17.12960
City FREDERICK	State MD	
Zip Code 21701	Purpose of Disbursement POSTAGE & DELIVERY	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. INGRAM SIGNS & SCREEN PRINTING		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 7605 HIGHWAY 35 S		Amount of Each Disbursement this Period 34630.55 Transaction ID : SB17.12663
City FOREST	State MS	
Zip Code 39074-9480	Purpose of Disbursement PRINTING & DESIGN SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KANGAROO EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 27 / 2014
Mailing Address 121 PINOLA DRIVE SE		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.12677
City MAGEE	State MS	
Zip Code 39111	Purpose of Disbursement TRAVEL: FOOD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	36955.55
TOTAL This Period (last page this line number only).....	

14021222503

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. KANGAROO EXPRESS		Date of Disbursement						
Mailing Address 121 PINOLA DRIVE SE		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>02</td><td>18</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	02	18	2014
M M	D D	Y Y Y Y						
02	18	2014						
City MAGEE	State MS	Zip Code 39111						
Purpose of Disbursement TRAVEL: FOOD	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>72.00</td></tr></table>		Amount of Each Disbursement this Period	72.00				
Amount of Each Disbursement this Period								
72.00								
Candidate Name	Transaction ID : SB17.12678							
Office Sought: <table border="1"><tr><td><input type="checkbox"/> House</td></tr><tr><td><input type="checkbox"/> Senate</td></tr><tr><td><input type="checkbox"/> President</td></tr></table>	<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<input type="checkbox"/> House								
<input type="checkbox"/> Senate								
<input type="checkbox"/> President								
State: District:	Category/Type							

Full Name (Last, First, Middle Initial) B. KANGAROO EXPRESS		Date of Disbursement						
Mailing Address 121 PINOLA DRIVE SE		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>20</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	20	2014
M M	D D	Y Y Y Y						
03	20	2014						
City MAGEE	State MS	Zip Code 39111						
Purpose of Disbursement TRAVEL: FOOD	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>100.00</td></tr></table>		Amount of Each Disbursement this Period	100.00				
Amount of Each Disbursement this Period								
100.00								
Candidate Name	Transaction ID : SB17.12679							
Office Sought: <table border="1"><tr><td><input type="checkbox"/> House</td></tr><tr><td><input type="checkbox"/> Senate</td></tr><tr><td><input type="checkbox"/> President</td></tr></table>	<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<input type="checkbox"/> House								
<input type="checkbox"/> Senate								
<input type="checkbox"/> President								
State: District:	Category/Type							

Full Name (Last, First, Middle Initial) C. KANGAROO EXPRESS		Date of Disbursement						
Mailing Address 121 PINOLA DRIVE SE		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>24</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	24	2014
M M	D D	Y Y Y Y						
03	24	2014						
City MAGEE	State MS	Zip Code 39111						
Purpose of Disbursement TRAVEL: FOOD	<table border="1"><tr><td>Amount of Each Disbursement this Period</td></tr><tr><td>125.57</td></tr></table>		Amount of Each Disbursement this Period	125.57				
Amount of Each Disbursement this Period								
125.57								
Candidate Name	Transaction ID : SB17.12680							
Office Sought: <table border="1"><tr><td><input type="checkbox"/> House</td></tr><tr><td><input type="checkbox"/> Senate</td></tr><tr><td><input type="checkbox"/> President</td></tr></table>	<input type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
<input type="checkbox"/> House								
<input type="checkbox"/> Senate								
<input type="checkbox"/> President								
State: District:	Category/Type							

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

297.57

1402122504

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. KANGAROO EXPRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 121 PINOLA DRIVE SE		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.12681
City MAGEE	State MS	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. LAKELAD INCOME PROPERTIES, LLC		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 4349 LAKELAND DR.		Amount of Each Disbursement this Period 1508.75 Transaction ID : SB17.12698
City	State	
Purpose of Disbursement RENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. LAKELAD INCOME PROPERTIES, LLC		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 4349 LAKELAND DR.		Amount of Each Disbursement this Period 1508.75 Transaction ID : SB17.12698
City	State	
Purpose of Disbursement RENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....

3117.50

TOTAL This Period (last page this line number only).....

1402122503

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. JIM MARLER		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.12674
City LAUREL State MS Zip Code 39441	Purpose of Disbursement MOVING EXPENSE Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. JIM MARLER		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.12675
City LAUREL State MS Zip Code 39441	Purpose of Disbursement MOVING EXPENSE Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. JIM MARLER		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.12676
City LAUREL State MS Zip Code 39441	Purpose of Disbursement MOVING EXPENSE Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6300.00
TOTAL This Period (last page this line number only).....	

14021222506

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. DAVE MAXWELL		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 751.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12592
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. DAVE MAXWELL		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 998.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12593
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. DONNA MAXWELL		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 2000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12614
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....

3749.00

TOTAL This Period (last page this line number only).....

1402122507

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. DONNA MAXWELL		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 2000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12615
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. RIC MCCLUSKEY		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 1000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12794
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. RIC MCCLUSKEY		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 1000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.12795
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

1402122508

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. JERRY MICKEL		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12671
City LAUREL	State MS	
Zip Code 39441	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JERRY MICKEL		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.12672
City LAUREL	State MS	
Zip Code 39441	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MICROSOFT ONLINE		Date of Disbursement MM / DD / YYYY 01 / 21 / 2014
Mailing Address ONE MICROSOFT WAY		Amount of Each Disbursement this Period 64.20 Transaction ID : SB17.12725
City REDMOND	State WA	
Zip Code 98052	Purpose of Disbursement SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....
TOTAL This Period (last page this line number only).....

1064.20

14021222509

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MICROSOFT ONLINE

Mailing Address **ONE MICROSOFT WAY**

City **REDMOND** State **WA** Zip Code **98052**

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 21 / 2014

Amount of Each Disbursement this Period

68.00

Transaction ID : **SB17.12726**

Category/ Type

Full Name (Last, First, Middle Initial)

B. MICROSOFT ONLINE

Mailing Address **ONE MICROSOFT WAY**

City **REDMOND** State **WA** Zip Code **98052**

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 18 / 2014

Amount of Each Disbursement this Period

128.40

Transaction ID : **SB17.12719**

Category/ Type

Full Name (Last, First, Middle Initial)

C. MICROSOFT ONLINE

Mailing Address **ONE MICROSOFT WAY**

City **REDMOND** State **WA** Zip Code **98052**

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 18 / 2014

Amount of Each Disbursement this Period

306.13

Transaction ID : **SB17.12720**

Category/ Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

502.53

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14021222510

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
01	20	2014

Amount of Each Disbursement this Period

217.72

Transaction ID : SB17.12721

Category/
Type

Full Name (Last, First, Middle Initial)

B. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
02	02	2014

Amount of Each Disbursement this Period

440.71

Transaction ID : SB17.12722

Category/
Type

Full Name (Last, First, Middle Initial)

C. MISSISSIPPI REPUBLICAN PARTY

Mailing Address 415 YAZOO STREET

City JACKSON State MS Zip Code 39201

Purpose of Disbursement
FILING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y
02	21	2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.12724

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

958.43

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1402122511

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. MY SEDAN		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 1430 BROADWAY #507		Amount of Each Disbursement this Period 152.50 Transaction ID : SB17.12730
City NEW YORK	State NY	
Zip Code 10018	Purpose of Disbursement TRAVEL: CAR RENTAL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) B. ROBBIE NICHOLS		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address 105 WALTHALL ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12802
City GREENWOOD	State MS	
Zip Code 38930-4426	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) C. ROBBIE NICHOLS		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 105 WALTHALL ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.12803
City GREENWOOD	State MS	
Zip Code 38930-4426	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2152.50

1402122512

**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 218 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. NOVA LIST

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
LIST RENTAL & MAINTENANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	13	2014

Amount of Each Disbursement this Period

1191.62

Transaction ID : SB17.12962

B. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	13	2014

Amount of Each Disbursement this Period

571.43

Transaction ID : SB17.12742

C. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

61.97

Transaction ID : SB17.12743

SUBTOTAL of Disbursements This Page (optional).....

1825.02

TOTAL This Period (last page this line number only).....

14021222513

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement						
Mailing Address 600 N MILITARY TRAIL		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>05</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	05	2014
M M	D D	Y Y Y Y						
03	05	2014						
City BOCA RATON	State FL	Zip Code 33496						
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period <table border="1"><tr><td>705.99</td></tr></table>	705.99					
705.99								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12744						
State: District:	Category/Type							

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement						
Mailing Address 600 N MILITARY TRAIL		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>10</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	10	2014
M M	D D	Y Y Y Y						
03	10	2014						
City BOCA RATON	State FL	Zip Code 33496						
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period <table border="1"><tr><td>44.48</td></tr></table>	44.48					
44.48								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12745						
State: District:	Category/Type							

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement						
Mailing Address 600 N MILITARY TRAIL		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>17</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	17	2014
M M	D D	Y Y Y Y						
03	17	2014						
City BOCA RATON	State FL	Zip Code 33496						
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period <table border="1"><tr><td>31.55</td></tr></table>	31.55					
31.55								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12746						
State: District:	Category/Type							

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

<table border="1"><tr><td>782.02</td></tr></table>	782.02
782.02	
<table border="1"><tr><td> </td></tr></table>	

140212251A

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. JAMIE PEAVY		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.12665
City LAUREL	State MS	
Zip Code 39441	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JAMIE PEAVY		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.12666
City LAUREL	State MS	
Zip Code 39441	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PETTY CASH - DAWN WALTERS		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address PO BOX 125		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.12749
City LAUREL	State MS	
Zip Code 39441-0125	Purpose of Disbursement PETTY CASH	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....

6100.00

TOTAL This Period (last page this line number only).....

1402122515

**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)
FRIENDS OF CHRIS MCDANIEL

A. PETTY CASH - DAWN WALTERS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 30 / 2014

Amount of Each Disbursement this Period
200.00

Transaction ID : SB17.12750

Category/Type

B. PETTY CASH - DAWN WALTERS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period
200.00

Transaction ID : SB17.12751

Category/Type

C. PETTY CASH - DAWN WALTERS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period
260.00

Transaction ID : SB17.12752

Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

660.00

1402122516

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. PETTY CASH - DAWN WALTERS		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address PO BOX 125		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.12753
City LAUREL	State MS	
Zip Code 39441-0125	Purpose of Disbursement PETTY CASH	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PETTY CASH - DAWN WALTERS		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address PO BOX 125		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.12754
City LAUREL	State MS	
Zip Code 39441-0125	Purpose of Disbursement PETTY CASH	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PETTY CASH - DAWN WALTERS		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address PO BOX 125		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.12755
City LAUREL	State MS	
Zip Code 39441-0125	Purpose of Disbursement PETTY CASH	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

1402122517

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. PETTY CASH - DAWN WALTERS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.12756

B. PETTY CASH - DAWN WALTERS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	27	2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.12757

C. PINE BELT OIL

Full Name (Last, First, Middle Initial)

Mailing Address 5317 US HIGHWAY 49

City HATTIESBURG State MS Zip Code 39401

Purpose of Disbursement
TRAVEL: GROUND TRAN

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	17	2014

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.12760

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

560.00

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14021222518

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. PINE BELT OIL		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 5317 US HIGHWAY 49		Amount of Each Disbursement this Period 46.00
City HATTIESBURG	State MS	Zip Code 39401
Purpose of Disbursement TRAVEL: GROUND TRAN	Candidate Name	Transaction ID : SB17.12761
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. PIXELHOUSE CONSULTING GROUP		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address 60 BROAD STREET		Amount of Each Disbursement this Period 1000.00
City MILFORD	State CT	Zip Code 06460
Purpose of Disbursement DIGITAL CONSULTING	Candidate Name	Transaction ID : SB17.12763
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. KEITH PLUNKETT		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address P.O. BOX 155		Amount of Each Disbursement this Period 3500.00
City FLORA	State MS	Zip Code 39017
Purpose of Disbursement PAYROLL	Candidate Name	Transaction ID : SB17.12682
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

4546.00

TOTAL This Period (last page this line number only).....

1402122519

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. KEITH PLUNKETT

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 155

City FLORA State MS Zip Code 39017

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 14 / 2014

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB17.12683

B. KEITH PLUNKETT

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 155

City FLORA State MS Zip Code 39017

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB17.12684

C. POSTAGE FOR DIRECT MAIL FUNDRAISING

Full Name (Last, First, Middle Initial)
Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement POSTAGE & DELIVERY

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 30 / 2014

Amount of Each Disbursement this Period: 3320.00

Transaction ID : SB17.12931

SUBTOTAL of Disbursements This Page (optional)..... 10320.00

TOTAL This Period (last page this line number only).....

1402122520

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. POSTAGE FOR DIRECT MAIL FUNDRAISING

Full Name (Last, First, Middle Initial)

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 30 / 2014

Amount of Each Disbursement this Period

13.69

Transaction ID : SB17.12932

B. POSTAGE FOR DIRECT MAIL FUNDRAISING

Full Name (Last, First, Middle Initial)

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
SERVICE FEES - POSTAGE

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

66.92

Transaction ID : SB17.12944

C. POSTAGE FOR DIRECT MAIL FUNDRAISING

Full Name (Last, First, Middle Initial)

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE & DELIVERY

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 20 / 2014

Amount of Each Disbursement this Period

4462.50

Transaction ID : SB17.12945

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4543.11

1402122521

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. POSTMASTER

Mailing Address **475 L'ENFANT PLAZA SW**

City **WASHINGTON** State **DC** Zip Code **20260**

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: **2014**
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 03 / 2014

Amount of Each Disbursement this Period
19.99

Transaction ID : **SB17.12764**

Category/Type

Full Name (Last, First, Middle Initial)
B. REGIONS BANK

Mailing Address **1900 FIFTH AVENUE NORTH**

City **BIRMINGHAM** State **AL** Zip Code **35203**

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: **2014**
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period
15.00

Transaction ID : **SB17.12783**

Category/Type

Full Name (Last, First, Middle Initial)
C. REGIONS BANK

Mailing Address **1900 FIFTH AVENUE NORTH**

City **BIRMINGHAM** State **AL** Zip Code **35203**

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: **2014**
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 06 / 2014

Amount of Each Disbursement this Period
15.00

Transaction ID : **SB17.12784**

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

49.99

14021222522

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Amount of Each Disbursement this Period
 20.00

Transaction ID : SB17.12785

Category/Type

Full Name (Last, First, Middle Initial)
B. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Amount of Each Disbursement this Period
 2.50

Transaction ID : SB17.12786

Category/Type

Full Name (Last, First, Middle Initial)
C. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Amount of Each Disbursement this Period
 4.00

Transaction ID : SB17.12787

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

26.50

1402122523

**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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 03	D D 11	Y Y Y Y 2014
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Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.12788

Category/
Type

B. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 03	D D 18	Y Y Y Y 2014
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Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.12789

Category/
Type

C. REGIONS BANK

Mailing Address 1900 FIFTH AVENUE NORTH

City BIRMINGHAM State AL Zip Code 35203

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 03	D D 24	Y Y Y Y 2014
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Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.12790

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

32.25

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1402122524

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. REGIONS BANK		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address 1900 FIFTH AVENUE NORTH		Amount of Each Disbursement this Period 2.50 Transaction ID : SB17.12791
City BIRMINGHAM	State AL Zip Code 35203	
Purpose of Disbursement BANK FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. REGIONS BANK		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 1900 FIFTH AVENUE NORTH		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.12792
City BIRMINGHAM	State AL Zip Code 35203	
Purpose of Disbursement BANK FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ERIN ROSE		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 13413 ST MARTIN DR		Amount of Each Disbursement this Period 90.80 Transaction ID : SB17.12624
City OCEAN SPRINGS	State MS Zip Code 39564	
Purpose of Disbursement TRAVEL REIMBURSEMENT	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

108.30

14021222525

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. ERIN ROSE		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014	
Mailing Address 13413 ST MARTIN DR		Amount of Each Disbursement this Period 2500.00	
City OCEAN SPRINGS	State MS	Zip Code 39564	Transaction ID : SB17.12625
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. ERIN ROSE		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014	
Mailing Address 13413 ST MARTIN DR		Amount of Each Disbursement this Period 344.00	
City OCEAN SPRINGS	State MS	Zip Code 39564	Transaction ID : SB17.12625
Purpose of Disbursement TRAVEL REIMBURSEMENT	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. ERIN ROSE		Date of Disbursement MM / DD / YYYY 02 / 15 / 2014	
Mailing Address 13413 ST MARTIN DR		Amount of Each Disbursement this Period 2220.83	
City OCEAN SPRINGS	State MS	Zip Code 39564	Transaction ID : SB17.12627
Purpose of Disbursement TRAVEL REIMBURSEMENT	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5064.83

14021222526

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. ERIN ROSE

Full Name (Last, First, Middle Initial)

Mailing Address 13413 ST MARTIN DR

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM/DD/YYYY 03/13/2014

Amount of Each Disbursement this Period 198.96

Transaction ID : SB17.12628

Category/Type

B. ERIN ROSE

Full Name (Last, First, Middle Initial)

Mailing Address 13413 ST MARTIN DR

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM/DD/YYYY 03/13/2014

Amount of Each Disbursement this Period 1254.64

Transaction ID : SB17.12629

Category/Type

C. ERIN ROSE

Full Name (Last, First, Middle Initial)

Mailing Address 13413 ST MARTIN DR

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement MM/DD/YYYY 03/15/2014

Amount of Each Disbursement this Period 2220.83

Transaction ID : SB17.12630

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

3674.43

TOTAL This Period (last page this line number only).....

14021222527

**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 233 OF 265

<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. MR. WILLIAM SCHUMACHER

Mailing Address 120 VIEWCREST DRIVE

City State Zip Code
CASTLE ROCK WA 98611

Purpose of Disbursement
In-kind - BUTTONS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 01	DD 22	YYYY 2014
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Amount of Each Disbursement this Period

212.35

Transaction ID : SB17.23527

Full Name (Last, First, Middle Initial)
B. SHELL

Mailing Address PO BOX 2463

City State Zip Code
HOUSTON TX 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 01	DD 09	YYYY 2014
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Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.12809

Full Name (Last, First, Middle Initial)
C. SHELL

Mailing Address PO BOX 2463

City State Zip Code
HOUSTON TX 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 01	DD 13	YYYY 2014
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Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.12810

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

257.35

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1402122528

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period
90.00

Transaction ID : SB17.12811

Full Name (Last, First, Middle Initial)
B. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 17 / 2014

Amount of Each Disbursement this Period
10.00

Transaction ID : SB17.12812

Full Name (Last, First, Middle Initial)
C. MELANIE SOJOURNER

Mailing Address 12 OAKWOOD PLANTATION ROAD

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 15 / 2014

Amount of Each Disbursement this Period
3261.44

Transaction ID : SB17.12715

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3361.44

1402122529

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 265
 (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. MELANIE SOJOURNER

Mailing Address 12 OAKWOOD PLANTATION ROAD

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 02 / 15 / 2014

Amount of Each Disbursement this Period
 3261.44

Transaction ID : SB17.12716

Full Name (Last, First, Middle Initial)
B. MELANIE SOJOURNER

Mailing Address 12 OAKWOOD PLANTATION ROAD

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 10 / 2014

Amount of Each Disbursement this Period
 1000.00

Transaction ID : SB17.12717

Full Name (Last, First, Middle Initial)
C. MELANIE SOJOURNER

Mailing Address 12 OAKWOOD PLANTATION ROAD

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 15 / 2014

Amount of Each Disbursement this Period
 3261.44

Transaction ID : SB17.12718

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7522.88

14021222530

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 265
(check only one)
 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 31 / 2014

Amount of Each Disbursement this Period: 295.00

Transaction ID : SB17.12819

Category/Type

Full Name (Last, First, Middle Initial)
B. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 07 / 2014

Amount of Each Disbursement this Period: 146.00

Transaction ID : SB17.12820

Category/Type

Full Name (Last, First, Middle Initial)
C. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 07 / 2014

Amount of Each Disbursement this Period: 753.50

Transaction ID : SB17.12821

Category/Type

SUBTOTAL of Disbursements This Page (optional) 1194.50

TOTAL This Period (last page this line number only)

1402122531

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 07 / 2014

Amount of Each Disbursement this Period
 753.50

Transaction ID : SB17.12822

Full Name (Last, First, Middle Initial)
B. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 07 / 2014

Amount of Each Disbursement this Period
 753.50

Transaction ID : SB17.12822

Full Name (Last, First, Middle Initial)
C. SSR COMMUNICATIONS, INC

Mailing Address 740 HIGHWAY 49 # R

City FLORA State MS Zip Code 39071

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 04 / 2014

Amount of Each Disbursement this Period
 250.00

Transaction ID : SB17.12825

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1757.00

1402122532

**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	<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)
FRIENDS OF CHRIS MCDANIEL

A. SUNRISE DATA SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LR&M: LIST RENTAL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 13 / 2014

Amount of Each Disbursement this Period

280.00

Transaction ID : SB17.12965

Category/ Type

B. SUNRISE DATA SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LR&M: LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 13 / 2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.12966

Category/ Type

C. SURGE DATA TECHNOLOGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1550 OLD ANNETTA RD

City ALEDO State TX Zip Code 76008-3855

Purpose of Disbursement
DATA MANAGEMENT SERV

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.12830

Category/ Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2930.00

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1402122533

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. CHRIS TAPIA

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
 PAYROLL

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 04 / 2014

Amount of Each Disbursement this Period
 1000.00

Transaction ID : **SB17.12564**

Category/Type

Full Name (Last, First, Middle Initial)
B. CHRIS TAPIA

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
 PAYROLL

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 15 / 2014

Amount of Each Disbursement this Period
 1000.00

Transaction ID : **SB17.12565**

Category/Type

Full Name (Last, First, Middle Initial)
C. TEXACO

Mailing Address 6001 BOLLINGER CANYON ROAD

City SAN RAMON State CA Zip Code 94583

Purpose of Disbursement
 TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 01 / 06 / 2014

Amount of Each Disbursement this Period
 20.04

Transaction ID : **SB17.12833**

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2020.04

1402122534

**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	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. TEXACO

Mailing Address **6001 BOLLINGER CANYON ROAD**

City **SAN RAMON** State **CA** Zip Code **94583**

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 09 / 2014

Amount of Each Disbursement this Period
182.82

Transaction ID : **SB17.12834**

Category/Type

Full Name (Last, First, Middle Initial)
B. TEXACO

Mailing Address **6001 BOLLINGER CANYON ROAD**

City **SAN RAMON** State **CA** Zip Code **94583**

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 19 / 2014

Amount of Each Disbursement this Period
75.92

Transaction ID : **SB17.12835**

Category/Type

Full Name (Last, First, Middle Initial)
C. TEXACO

Mailing Address **6001 BOLLINGER CANYON ROAD**

City **SAN RAMON** State **CA** Zip Code **94583**

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 26 / 2014

Amount of Each Disbursement this Period
125.00

Transaction ID : **SB17.12836**

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

383.74

14021222535

**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 241 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. TEXACO		Date of Disbursement
Mailing Address 6001 BOLLINGER CANYON ROAD		MM / DD / YYYY 03 / 27 / 2014
City SAN RAMON	State CA	Zip Code 94583
Purpose of Disbursement TRAVEL: FUEL	Category/ Type	Amount of Each Disbursement this Period 125.00
Candidate Name		Transaction ID : SB17.12837
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE BREAKERS		Date of Disbursement
Mailing Address 1 S COUNTY RD		MM / DD / YYYY 03 / 03 / 2014
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement TRAVEL: LODGING	Category/ Type	Amount of Each Disbursement this Period 1467.05
Candidate Name		Transaction ID : SB17.12845
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE BREAKERS		Date of Disbursement
Mailing Address 1 S COUNTY RD		MM / DD / YYYY 03 / 03 / 2014
City PALM BEACH	State FL	Zip Code 33480
Purpose of Disbursement TRAVEL: LODGING	Category/ Type	Amount of Each Disbursement this Period 1491.52
Candidate Name		Transaction ID : SB17.12846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3083.57
TOTAL This Period (last page this line number only).....	

1402122536

**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 242 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. THE RITZ-CARLTON		Date of Disbursement MM / DD / YYYY 01 / 21 / 2014
Mailing Address 4445 WILLARD AVENUE SUITE 800		Amount of Each Disbursement this Period 790.05 Transaction ID : SB17.12851
City CHEVY CHASE	State MD	
Zip Code 20815	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. TRAIL BLAZER CAMPAIGN SERVICES, INC.		Date of Disbursement MM / DD / YYYY 01 / 22 / 2014
Mailing Address 620 MENDELSSOHN SUITE 186		Amount of Each Disbursement this Period 3850.00 Transaction ID : SB17.12860
City MINNEAPOLIS	State MN	
Zip Code 55427	Purpose of Disbursement COMPLIANCE SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TRAIL BLAZER CAMPAIGN SERVICES, INC.		Date of Disbursement MM / DD / YYYY 02 / 02 / 2014
Mailing Address 620 MENDELSSOHN SUITE 186		Amount of Each Disbursement this Period 3850.00 Transaction ID : SB17.12861
City MINNEAPOLIS	State MN	
Zip Code 55427	Purpose of Disbursement COMPLIANCE SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8490.05
TOTAL This Period (last page this line number only).....	

14021222537

**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 243 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement
Mailing Address 190 MONROE AVE NW STE 500		MM / DD / YYYY 01 / 31 / 2014
City GRAND RAPIDS	State MI	Zip Code 49503
Purpose of Disbursement MERCHANT FEES	Category/ Type	Amount of Each Disbursement this Period 276.86
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12864
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement
Mailing Address 190 MONROE AVE NW STE 500		MM / DD / YYYY 02 / 07 / 2014
City GRAND RAPIDS	State MI	Zip Code 49503
Purpose of Disbursement MERCHANT FEES	Category/ Type	Amount of Each Disbursement this Period 66.10
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12865
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. TRANSAXT		Date of Disbursement
Mailing Address 190 MONROE AVE NW STE 500		MM / DD / YYYY 02 / 13 / 2014
City GRAND RAPIDS	State MI	Zip Code 49503
Purpose of Disbursement MERCHANT FEES	Category/ Type	Amount of Each Disbursement this Period 325.30
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.12866
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	668.26
TOTAL This Period (last page this line number only).....	

1402122538

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 265
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 21 / 2014

Amount of Each Disbursement this Period
139.54

Transaction ID : SB17.12867

Category/Type

Full Name (Last, First, Middle Initial)
B. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 26 / 2014

Amount of Each Disbursement this Period
88.96

Transaction ID : SB17.12868

Category/Type

Full Name (Last, First, Middle Initial)
C. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 06 / 2014

Amount of Each Disbursement this Period
114.80

Transaction ID : SB17.12869

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 343.30

TOTAL This Period (last page this line number only).....

1402122539

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2014

Amount of Each Disbursement this Period
155.46

Transaction ID : SB17.12870

Full Name (Last, First, Middle Initial)
B. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2014

Amount of Each Disbursement this Period
237.36

Transaction ID : SB17.12871

Full Name (Last, First, Middle Initial)
C. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 27 / 2014

Amount of Each Disbursement this Period
386.84

Transaction ID : SB17.12872

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

779.66

1402122540

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 265
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. TRANSPORTATION COMPLIANCE SERVICES

Mailing Address **6819 WASHINGTON AVE**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period
2000.00

Transaction ID : **SB17.12876**

Category/Type

Full Name (Last, First, Middle Initial)
B. TVEYES INC.

Mailing Address **2150 POST RD**

City **FAIRFIELD** State **CT** Zip Code **06824**

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
01 / 31 / 2014

Amount of Each Disbursement this Period
1500.00

Transaction ID : **SB17.12878**

Category/Type

Full Name (Last, First, Middle Initial)
C. UNITED STATES POSTAL SERVICE

Mailing Address **475 L'ENFANT PLAZA SW**

City **WASHINGTON** State **DC** Zip Code **20260**

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period
782.00

Transaction ID : **SB17.12880**

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4282.00

14021222541

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. UNITED STATES POSTAL SERVICE

Full Name (Last, First, Middle Initial)

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	10	2014

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.12881

Category/
Type

B. UNITED STATES POSTAL SERVICE

Full Name (Last, First, Middle Initial)

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	12	2014

Amount of Each Disbursement this Period

7.49

Transaction ID : SB17.12882

Category/
Type

C. US AIRWAYS

Full Name (Last, First, Middle Initial)

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	07	2014

Amount of Each Disbursement this Period

399.50

Transaction ID : SB17.12884

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

417.04

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14021222542

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 265
(check only one)
 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 02 / 2014

Amount of Each Disbursement this Period
98.16

Transaction ID : SB17.12885

Category/
Type

Full Name (Last, First, Middle Initial)
B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 03 / 2014

Amount of Each Disbursement this Period
265.71

Transaction ID : SB17.12886

Category/
Type

Full Name (Last, First, Middle Initial)
C. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 06 / 2014

Amount of Each Disbursement this Period
98.66

Transaction ID : SB17.12887

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

462.53

1402122543

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 07 / 2014

Amount of Each Disbursement this Period
6.40

Transaction ID : SB17.12888

Category/Type

Full Name (Last, First, Middle Initial)
B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 08 / 2014

Amount of Each Disbursement this Period
5.07

Transaction ID : SB17.12889

Category/Type

Full Name (Last, First, Middle Initial)
C. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 09 / 2014

Amount of Each Disbursement this Period
1.73

Transaction ID : SB17.12890

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 13.20

TOTAL This Period (last page this line number only).....

1402122544

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. VANCO SERVICES		Date of Disbursement MM / DD / YYYY 01 / 13 / 2014
Mailing Address 12600 WHITEWATER DRIVE SUITE 200		Amount of Each Disbursement this Period 86.27 Transaction ID : SB17.12891
City MINNETONKA	State MN Zip Code 55343	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VANCO SERVICES		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 12600 WHITEWATER DRIVE SUITE 200		Amount of Each Disbursement this Period 76.33 Transaction ID : SB17.12892
City MINNETONKA	State MN Zip Code 55343	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VANCO SERVICES		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 12600 WHITEWATER DRIVE SUITE 200		Amount of Each Disbursement this Period 6.93 Transaction ID : SB17.12893
City MINNETONKA	State MN Zip Code 55343	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	169.53
TOTAL This Period (last page this line number only).....	

1402122545

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. VANCO SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 15 / 2014

Amount of Each Disbursement this Period
76.85

Transaction ID : SB17.12894

Category/Type

B. VANCO SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 16 / 2014

Amount of Each Disbursement this Period
7.13

Transaction ID : SB17.12895

Category/Type

C. VANCO SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 17 / 2014

Amount of Each Disbursement this Period
72.54

Transaction ID : SB17.12896

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

156.52

14021222546

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
02/04/2014

Amount of Each Disbursement this Period: 1.83

Transaction ID : SB17.12897

B. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
02/06/2014

Amount of Each Disbursement this Period: 3.20

Transaction ID : SB17.12898

C. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
02/10/2014

Amount of Each Disbursement this Period: 1.14

Transaction ID : SB17.12899

SUBTOTAL of Disbursements This Page (optional)..... 6.17

TOTAL This Period (last page this line number only).....

1402122547

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 265
 (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
 SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
 MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 02 / 11 / 2014

Amount of Each Disbursement this Period
 0.59

Transaction ID : SB17.12900

Full Name (Last, First, Middle Initial)
B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
 SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
 MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 02 / 18 / 2014

Amount of Each Disbursement this Period
 24.95

Transaction ID : SB17.12901

Full Name (Last, First, Middle Initial)
C. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
 SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
 MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 04 / 2014

Amount of Each Disbursement this Period
 1.83

Transaction ID : SB17.12902

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

27.37

14021222548

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 06 / 2014

Amount of Each Disbursement this Period: 3.20

Transaction ID : SB17.12903

Category/Type

B. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 10 / 2014

Amount of Each Disbursement this Period: 1.14

Transaction ID : SB17.12904

Category/Type

C. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 11 / 2014

Amount of Each Disbursement this Period: 0.59

Transaction ID : SB17.12905

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 4.93

TOTAL This Period (last page this line number only).....

1402122549

**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 255 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. VANCO SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
03/17/2014

Amount of Each Disbursement this Period: 2.00

Transaction ID : SB17.12906

B. WALMART

Full Name (Last, First, Middle Initial)

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
02/13/2014

Amount of Each Disbursement this Period: 51.19

Transaction ID : SB17.12907

C. WALMART

Full Name (Last, First, Middle Initial)

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY
02/13/2014

Amount of Each Disbursement this Period: 98.48

Transaction ID : SB17.12908

SUBTOTAL of Disbursements This Page (optional)..... 151.67

TOTAL This Period (last page this line number only).....

14021222550

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 256 OF 265
(check only one)

<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)
FRIENDS OF CHRIS MCDANIEL

A. DAWN WALTERS

Full Name (Last, First, Middle Initial)
Mailing Address 152 MONARCH RD

City OVETT State MS Zip Code 39464

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 15 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.12594

Category/Type

B. DAWN WALTERS

Full Name (Last, First, Middle Initial)
Mailing Address 152 MONARCH RD

City OVETT State MS Zip Code 39464

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 15 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.12595

Category/Type

C. WASHINGTON INTELLIGENCE BUREAU

Full Name (Last, First, Middle Initial)
Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement POSTAGE & DELIVERY

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 31 / 2014

Amount of Each Disbursement this Period: 250.00

Transaction ID : SB17.12934

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3750.00

TOTAL This Period (last page this line number only).....

1402122551

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 265
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement POSTAGE & DELIVERY

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 14 / 2014

Amount of Each Disbursement this Period
250.00

Transaction ID : SB17.12937

Full Name (Last, First, Middle Initial)
B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement CAGING AND ESCROW

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 27 / 2014

Amount of Each Disbursement this Period
897.02

Transaction ID : SB17.12946

Full Name (Last, First, Middle Initial)
C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement SHIPPING EXPENSE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 27 / 2014

Amount of Each Disbursement this Period
3.41

Transaction ID : SB17.12947

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.43

1402122552

**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 258 OF 265	
	<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)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address **4128 PEPSI PLACE**

City **CHANTILLY** State **VA** Zip Code **20151**

Purpose of Disbursement **POSTAGE & DELIVERY**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 28 / 2014

Amount of Each Disbursement this Period: **250.00**

Transaction ID : **SB17.12955**

Full Name (Last, First, Middle Initial)
B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address **4128 PEPSI PLACE**

City **CHANTILLY** State **VA** Zip Code **20151**

Purpose of Disbursement **POSTAGE & DELIVERY**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 14 / 2014

Amount of Each Disbursement this Period: **250.00**

Transaction ID : **SB17.12967**

Full Name (Last, First, Middle Initial)
C. TIMOTHY WELLS

Mailing Address **P.O. BOX 125**

City **LAUREL** State **MS** Zip Code **39441**

Purpose of Disbursement **PAYROLL**

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period: **500.00**

Transaction ID : **SB17.12855**

SUBTOTAL of Disbursements This Page (optional)..... **1000.00**

TOTAL This Period (last page this line number only).....

1402122553

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
A. TIMOTHY WELLS

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2014

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Amount of Each Disbursement this Period
262.80

Transaction ID : SB17.12856

Full Name (Last, First, Middle Initial)
B. TIMOTHY WELLS

Date of Disbursement
MM / DD / YYYY
03 / 15 / 2014

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Amount of Each Disbursement this Period
500.00

Transaction ID : SB17.12857

Full Name (Last, First, Middle Initial)
C. LINDA LARGENT WHITFIELD

Date of Disbursement
MM / DD / YYYY
01 / 15 / 2014

Mailing Address 116 EMMETT MEITZLER RD

City PICAYUNE State MS Zip Code 39437

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Amount of Each Disbursement this Period
2500.00

Transaction ID : SB17.12707

SUBTOTAL of Disbursements This Page (optional)..... 3262.80

TOTAL This Period (last page this line number only).....

1402122554

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 265
 (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle initial)
A. WILSON PERKINS ALLEN OPINION RESEARCH

Mailing Address **324 SECOND STREET, SE**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period
27240.00

Transaction ID : **SB17.12910**

Full Name (Last, First, Middle Initial)
B. HALEY WINNINGHAM

Mailing Address **907 SIMPSON HWY 149**

City **MAGEE** State **MS** Zip Code **39111**

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
01 / 15 / 2014

Amount of Each Disbursement this Period
1500.00

Transaction ID : **SB17.12657**

Full Name (Last, First, Middle Initial)
C. HALEY WINNINGHAM

Mailing Address **907 SIMPSON HWY 149**

City **MAGEE** State **MS** Zip Code **39111**

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 M M / D D / Y Y Y Y
01 / 31 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : **SB17.12658**

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

29240.00

1402122555

**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 261 OF 265
	<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)
FRIENDS OF CHRIS MCDANIEL

A. HALEY WINNINGHAM

Full Name (Last, First, Middle Initial)
Mailing Address 907 SIMPSON HWY 149

City MAGEE State MS Zip Code 39111

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 02/14/2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.12659

B. HALEY WINNINGHAM

Full Name (Last, First, Middle Initial)
Mailing Address 907 SIMPSON HWY 149

City MAGEE State MS Zip Code 39111

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 03/15/2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.12660

C. RJ YOUNG

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 40623

City NASHVILLE State TN Zip Code 37204

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 01/20/2014

Amount of Each Disbursement this Period: 324.41

Transaction ID : SB17.12799

SUBTOTAL of Disbursements This Page (optional)..... 4324.41

TOTAL This Period (last page this line number only).....

1402122556

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. RJ YOUNG		Date of Disbursement						
Mailing Address P.O. BOX 40623		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>02</td><td>02</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	02	02	2014
M M	D D	Y Y Y Y						
02	02	2014						
City	State	Zip Code						
NASHVILLE	TN	37204						
Purpose of Disbursement PAYROLL	Category/ Type	Amount of Each Disbursement this Period						
Candidate Name		324.61						
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)						
State:	District:	Transaction ID : SB17.12800						

Full Name (Last, First, Middle Initial) B. RJ YOUNG		Date of Disbursement						
Mailing Address P.O. BOX 40623		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>03</td><td>04</td><td>2014</td></tr></table>	M M	D D	Y Y Y Y	03	04	2014
M M	D D	Y Y Y Y						
03	04	2014						
City	State	Zip Code						
NASHVILLE	TN	37204						
Purpose of Disbursement PAYROLL	Category/ Type	Amount of Each Disbursement this Period						
Candidate Name		765.60						
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)						
State:	District:	Transaction ID : SB17.12801						

Full Name (Last, First, Middle Initial) C.		Date of Disbursement						
Mailing Address		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td></td><td></td><td></td></tr></table>	M M	D D	Y Y Y Y			
M M	D D	Y Y Y Y						
City	State	Zip Code						
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period						
Candidate Name								
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)						
State:	District:							

SUBTOTAL of Disbursements This Page (optional).....	1090.21
TOTAL This Period (last page this line number only).....	317145.06

1402122557

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Transaction ID : SC/10.10215

LOAN SOURCE Full Name (Last, First, Middle Initial)

CHRISTOPHER BRIAN MCDANIEL

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
506 SOUTH COURT ST

City State ZIP Code
ELLISVILLE MS 39437

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100.00 0.00 100.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 10 M / D 07 D / Y 2013 Y M M / D D / Y 12/31/2014 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....

100.00

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.

14021222559

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **FRIENDS OF CHRIS MCDANIEL** Transaction ID : **SC/10.10216**

LOAN SOURCE Full Name (Last, First, Middle Initial) CHRISTOPHER BRIAN MCDANIEL	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 506 SOUTH COURT ST		
City ELLISVILLE	State MS	ZIP Code 39437

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	----------------------------------------------------------

TERMS

Date Incurred M 10 / D 15 / Y 2013	Date Due M M / D D / Y 12/31/2014	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	--------------------------------------	-------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)...	▶ 100000.00
TOTALS This Period (last page in this line only)...	▶ 100100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1402122560

114021222561



11/12/14

From: (817) 848-8887
Bradley T. Crate
Red Curve Solutions
138 Conant Street
Beverly, MA 01915

Origin ID: MXGA

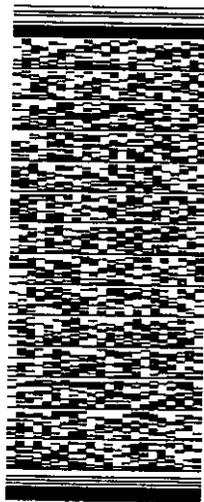


J142214082303W

SHIP TO: (202) 224-0322

BILL SENDER
Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING
WASHINGTON, DC 20510

- Ins
- 1.1
- 2.1
- 3.1
- 4.1



FedEx Ship Manager - Print Your Label(s)

Ship Date: 12NOV14
ActWgt 20.0 LB
CAD: 10565371//NET3550

Delivery Address Bar Code



Ref # Friends of Chris McDaniel
Invoice #
PO #
Dept #

THU - 13 NOV 10:30A
PRIORITY OVERNIGHT

TRK# 7718 3091 2222

0201

EP YKNA
20510
DC-US
IAD



52GJ616C8AC9

After printing this label:



Align top of FedEx Express® Shipping Label here.

Sender: You must seal flap before shipping.

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

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	11-13-14	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

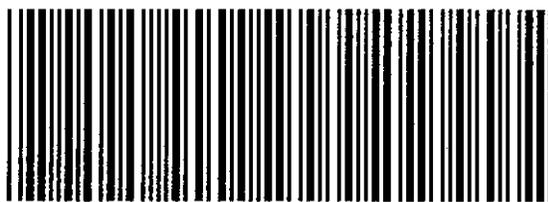
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **11-17-14**

14021222552



SEN PATCH



SEN PATCH

14021222563