

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

BILL FLORES FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 6207

Check if different than previously reported. (ACC)

BRYAN

TX

77805

2. **FEC IDENTIFICATION NUMBER** ▼

C C00472241

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

TX

17

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Nancy Rennaker

Signature of Treasurer Nancy Rennaker

**[Electronically Filed]**

Date

/  /

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

Office Use Only

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**BILL FLORES FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	222507.81	1045926.39
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	11400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	222507.81	1034526.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	84210.68	458564.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	1274.48	2550.48
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	82936.20	456014.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	568175.19	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	345373.30	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**BILL FLORES FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96198.81	511098.81
(ii) Unitemized.....	2209.00	19324.00
(iii) TOTAL of contributions from individuals ▶	98407.81	530422.81
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	124100.00	515426.85
(d) The Candidate.....	0.00	76.73
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	222507.81	1045926.39
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	3882.22
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	250000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	1274.48	2550.48
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	107.17
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	223782.29	1302466.26

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	84210.68	458564.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	450000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	450000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	11400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	11400.00
21. OTHER DISBURSEMENTS .....	42014.00	70064.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	126224.68	990028.70

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	470617.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	223782.29
25. SUBTOTAL (add Line 23 and Line 24).....	694399.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	126224.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	568175.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 112
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James H. Alford**

Mailing Address 1320 S Rivercrest Dr

City State Zip Code  
Gonzales TX 78629

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

Name of Employer Occupation  
Gonzales I.S.D. L.S.S.P.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.7331**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Wes Bailey**

Mailing Address 103 Westridge Ln

City State Zip Code  
Waco TX 76712

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

Name of Employer Occupation  
Bailey Insurance & Risk Management Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11AI.7332**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. A.L. Ballard**

Mailing Address 1021 Main St Ste 2310

City State Zip Code  
Houston TX 77002

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

Name of Employer Occupation  
Ballard Exploration Oil & Gas

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : SA11AI.7333**

Amount of Each Receipt this Period  
2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Margaret Katherine Banks**

Mailing Address 17901 Osage Trail Dr

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
Texas A&M Dean

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
249.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2014

**Transaction ID : SA11A1.7335**

Amount of Each Receipt this Period  
249.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph G. Beard**

Mailing Address 3081 Rockbridge Rd

City State Zip Code  
Mc Gregor TX 76657

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

Name of Employer Occupation  
West Dale Asset Mgt. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11A1.7337**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew P. Biar**

Mailing Address PO Box 79224

City State Zip Code  
Houston TX 77279

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

Name of Employer Occupation  
Strategic Public Affairs, Inc. President/Public Affairs Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : SA11A1.7338**

Amount of Each Receipt this Period  
250.00

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

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

1499.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Ed Bosarge**

Mailing Address 4203 Yoakum Blvd Ste 200

City Houston State TX Zip Code 77006

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

Name of Employer Capital Technologies, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : SA11AI.7339**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Brophy**

Mailing Address 3655 Church Rd

City Mc Gregor State TX Zip Code 76657

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

Name of Employer Beard Kultgen Brophy Bostwick & Dickso Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11AI.7341**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Dortha Brown**

Mailing Address 7621 Craig St

City Ft Worth State TX Zip Code 76112

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  
 06 / 21 / 2014

**Transaction ID : SA11AI.7343**

Amount of Each Receipt this Period  
250.00

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

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

4850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Regina Buice**

Mailing Address 17042 Star Canyon Dr

City Waco State TX Zip Code 76712

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

Name of Employer Self Employed Occupation Golden Acres

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7345**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Bradford Burney**

Mailing Address 2601 Eldridge Ln

City Waco State TX Zip Code 76710

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

Name of Employer LM Burney Distributors Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7347**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Francis M. Bushnell Jr.**

Mailing Address 1116 Castle Bluff Cir

City Waco State TX Zip Code 76712

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 / D D / Y Y Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11A1.7348**

Amount of Each Receipt this Period  
200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Sammy Citrano III**

Mailing Address 10008 Treeline Dr

City State Zip Code  
Waco TX 76712

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

Name of Employer Occupation  
Georges Restaurant Inc. Restaurant Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

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

**Transaction ID : SA11AI.7349**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert C. Cloud**

Mailing Address 205 Trailview Dr

City State Zip Code  
Waco TX 76712

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.7351**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James D. Dannenbaum**

Mailing Address 3100 W Alabama St

City State Zip Code  
Houston TX 77098

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

Name of Employer Occupation  
Dannenbaum Engineering Engineer/President

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  
 06 / 23 / 2014

**Transaction ID : SA11AI.7353**

Amount of Each Receipt this Period  
2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Becky Davis**

Mailing Address 19827 Cypress Church Rd

City Cypress State TX Zip Code 77433

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11AI.7355**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Monty Davis**

Mailing Address 19827 Cypress Church Rd

City Cypress State TX Zip Code 77433

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

Name of Employer Core Lab LP Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014

**Transaction ID : SA11AI.7357**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Tommye Lou Davis**

Mailing Address 2800 Washington Ave

City Waco State TX Zip Code 76710

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.7359**

Amount of Each Receipt this Period  
 250.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Christopher DeCluitt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2014
Mailing Address 2215 Ridgewood Dr		<b>Transaction ID : SA11A1.7360</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Sovereign Corporation	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>B. John W. Dietz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2014
Mailing Address 3605 Austin Ave		<b>Transaction ID : SA11A1.7361</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cen-Tex Monuments	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Markham B. Dossett</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2014
Mailing Address PO Box 23328		<b>Transaction ID : SA11A1.7363</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Talon Asset Management	Occupation broker/rancher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 12 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Markham B. Dossett**

Mailing Address PO Box 23328

City State Zip Code  
Waco TX 76702

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

Name of Employer Occupation  
Talon Asset Management broker/rancher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : SA11A1.7364**

Amount of Each Receipt this Period  
0.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Dossett**

Mailing Address 16 Hillandale Rd

City State Zip Code  
Waco TX 76710

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

Name of Employer Occupation  
n/a homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2014

**Transaction ID : SA11A1.7366**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carr Dupuy**

Mailing Address PO Box 7833

City State Zip Code  
Waco TX 76714

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

Name of Employer Occupation  
Dupuy Oxygen & Supply Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2014

**Transaction ID : SA11A1.7368**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 112
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Walter P. Felton III</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address 2500 Arroyo Rd		<b>Transaction ID : SA11A1.7370</b>	
City Waco	State TX	Zip Code 76710	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Wells Fargo Bank	Occupation Banker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Keith Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address 6010 Canyon Trl		<b>Transaction ID : SA11A1.7372</b>	
City Mc Gregor	State TX	Zip Code 76657	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Ferguson-Davis Wealth Management Group	Occupation Principle Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Wesley J. Filer</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address PO Box 1470		<b>Transaction ID : SA11A1.7374</b>	
City Waco	State TX	Zip Code 76703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Naman, Howell, Smith & Lee PLLC	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 112
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ralph H. Fite</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014	
Mailing Address 10222 Del Monte Dr		<b>Transaction ID : SA11AI.7376</b>	
City Houston	State TX	Zip Code 77042	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Welcome Group, LLC	Occupation Director of Finance		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Ralph H. Fite</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 10222 Del Monte Dr		<b>Transaction ID : SA11AI.7377</b>	
City Houston	State TX	Zip Code 77042	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Welcome Group, LLC	Occupation Director of Finance		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Joe P. Flores</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address PO Box 147		<b>Transaction ID : SA11AI.7378</b>	
City Stratford	State TX	Zip Code 79084	Amount of Each Receipt this Period _____ 430.00
FEC ID number of contributing federal political committee.		C	
Name of Employer TEXAS FARM BUREAU INSURANCE	Occupation INSURANCE AGENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4730.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1180.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joe P. Flores**

Mailing Address PO Box 147

City State Zip Code  
Stratford TX 79084

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

Name of Employer Occupation  
TEXAS FARM BUREAU INSURANCE INSURANCE AGENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5160.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11AI.7379**

Amount of Each Receipt this Period  
430.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Holly Frost**

Mailing Address 6632 Rodrigo St

City State Zip Code  
Houston TX 77007

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

Name of Employer Occupation  
Memory Systems Retired CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11AI.7381**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. L. Hayes Fuller III**

Mailing Address PO Box 1470

City State Zip Code  
Waco TX 76703

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

Name of Employer Occupation  
Naman, Howell, Smith & Lee, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.7383**

Amount of Each Receipt this Period  
500.00

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

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

3530.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Gencarelli**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

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

Name of Employer Gencarelli Group Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11A1.7385**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward E. Getterman**

Mailing Address 518 Lariat Trl

City Mc Gregor State TX Zip Code 76657

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

Name of Employer Double E Strategies, LLC Occupation Real Estate Investments and Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11A1.7386**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Chris M. Giblin**

Mailing Address 1304 Chancel Pl

City Alexandria State VA Zip Code 22314

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

Name of Employer Oglesby Government Relations Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11A1.7388**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Leslee Koch Gilbert**

Mailing Address 1023 N Royal St Unit 114

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

Name of Employer Van Scoyoc	Occupation VP
--------------------------------	------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11AI.7390**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Jill Giroir**

Mailing Address 918 Hawthorn St

City College Station	State TX	Zip Code 77840
-------------------------	-------------	-------------------

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

Name of Employer Texas A&M University	Occupation Professor
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11AI.7392**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David Grenader**

Mailing Address 4708 Caroline St

City Houston	State TX	Zip Code 77004
-----------------	-------------	-------------------

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  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.7393**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kerry Haliburton**

Mailing Address PO Box 1470

City: Waco State: TX Zip Code: 76703

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

Name of Employer: Naman Howell Smith & Lee, PLLC Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 21 / 2014

**Transaction ID : SA11AI.7395**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles B. Harris**

Mailing Address 3454 Bellwood Ct

City: Fort Worth State: TX Zip Code: 76109

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

Name of Employer: Harris Finley Bogle Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 17 / 2014

**Transaction ID : SA11AI.7397**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**James R. Hawkins**

Mailing Address 5305 Hillcrest Dr

City: Waco State: TX Zip Code: 76710

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

Name of Employer: AMC Financial Holdings Occupation: Chairman of the Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 13 / 2014

**Transaction ID : SA11AI.7398**

Amount of Each Receipt this Period: 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David L. Henderson**

Mailing Address 11628 Pine Creek Ct

City Aledo State TX Zip Code 76008

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

Name of Employer Seely Oil Company Occupation Executive VP

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  
 04 / 04 / 2014

**Transaction ID : SA11AI.7400**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Glenn Hill**

Mailing Address PO Box 329

City Snook State TX Zip Code 77878

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 / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.7402**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carey Hobbs**

Mailing Address 12 Spanish Oak

City Waco State TX Zip Code 76710

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

Name of Employer Hobbs Bonded Fibers Occupation Manufacturer

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  
 06 / 21 / 2014

**Transaction ID : SA11AI.7403**

Amount of Each Receipt this Period  
600.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Peggy Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 307 Grandview Pl		<b>Transaction ID : SA11A1.7405</b>
City San Antonio	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mark Hussey</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 7252 Cnp Rd		<b>Transaction ID : SA11A1.7407</b>
City Bryan	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Texas A&M University	Occupation Interim President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Will Jones</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 5309 Hillcrest Dr		<b>Transaction ID : SA11A1.7409</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer McLennan County	Occupation Commissioner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Mr. Richard Kardys</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 103 Cave Lane		<b>Transaction ID : SA11AI.7410</b>
City San Antonio	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Frost National Bank	Occupation Executive Vice President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>Mr. James L. Keller</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 5929 Wild Horse Run		<b>Transaction ID : SA11AI.7411</b>
City College Station	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Texas A&M Foundation	Occupation Director of Development	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00	

Full Name (Last, First, Middle Initial) <b>Dr. Alex B. Kenton</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 55 Westelm Cir		<b>Transaction ID : SA11AI.7412</b>
City San Antonio	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mednax	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1525.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 22 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas R. Kirk**

Mailing Address 918 W 8th St

City State Zip Code  
Mc Gregor TX 76657

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  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2014

**Transaction ID : SA11A1.7413**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kyle Knas**

Mailing Address 13812 Harbor Dr

City State Zip Code  
Woodway TX 76712

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2014

**Transaction ID : SA11A1.7415**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Paul Kruse**

Mailing Address 3880 Mustang Rd

City State Zip Code  
Brenham TX 77833

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

Name of Employer Occupation  
Blue Bell Creameries L.P. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11A1.7416**

Amount of Each Receipt this Period  
1000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 112	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Peter Kultgen**

Mailing Address 1701 W Loop 340

City Waco State TX Zip Code 76712

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

Name of Employer Bird-Kultgen Ford Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11A1.7418**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kary Lalani**

Mailing Address 1108 Chiswick High Dr

City Waco State TX Zip Code 76712

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

Name of Employer Lalani Lodging Inc. Occupation Director of Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : SA11A1.7420**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Laura Lalani**

Mailing Address 1108 Chiswick High Dr

City Waco State TX Zip Code 76712

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  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : SA11A1.7422**

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

**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 24 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Mr. Willie Langston</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2014
Mailing Address 2314 Persa St		<b>Transaction ID : SA11AI.7423</b>
City Houston	State TX	Zip Code 77019
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2600.00
Name of Employer Avalon Advisors, LP	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>Mrs. Rebecca Lindsey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2014
Mailing Address 2624 Old Oaks Dr		<b>Transaction ID : SA11AI.7424</b>
City Waco	State TX	Zip Code 76710
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Ms. Kimberly Linthicum</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 2459 Tunlaw Rd NW		<b>Transaction ID : SA11AI.7426</b>
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Myriad Genetic Laboratories, Inc.	Occupation Lobbyist	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 25 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Wesley Lloyd**

Mailing Address 10604 Aquilla Trl

City State Zip Code  
Waco TX 76708

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

Name of Employer Occupation  
Naman Howell Smith & Lee, PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2014

**Transaction ID : SA11A1.7428**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Harry Lucas Jr.**

Mailing Address 327 Congress Ave Ste 500

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation  
Lucas Petroleum Group, Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : SA11A1.7430**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stan Marek Jr.**

Mailing Address 3539 Oak Forest Dr

City State Zip Code  
Houston TX 77018

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

Name of Employer Occupation  
The Marek Family Companies Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2014

**Transaction ID : SA11A1.7432**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. L. Lowry Mays**

Mailing Address PO Box 659512

City San Antonio State TX Zip Code 78265

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

Name of Employer Clear Channel Communications, Inc. Occupation Chairman & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7434**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald P. McCann**

Mailing Address 437 Winding Creek Ln

City Mc Gregor State TX Zip Code 76657

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

Name of Employer Clayton Homes Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11A1.7436**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Russell L. McClellan**

Mailing Address 3510 N Ridge Dr

City Waco State TX Zip Code 76710

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

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

**Transaction ID : SA11A1.7437**

Amount of Each Receipt this Period  
 2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul F. McClinton**

Mailing Address 4547 Lake Shore Dr

City State Zip Code  
Waco TX 76710

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

Name of Employer Occupation  
Credit Corporation of America Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 18 / 2014

**Transaction ID : SA11A1.7439**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**B.J. McCombs**

Mailing Address PO Box Bh003

City State Zip Code  
San Antonio TX 78201

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

Name of Employer Occupation  
Self Employed Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2014

**Transaction ID : SA11A1.7440**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Janie McDougal**

Mailing Address 4150 Shadowbrook Cir

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
self Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1125.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : SA11A1.7441**

Amount of Each Receipt this Period  
125.00

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

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

1375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Lisette M. Mondello**

Mailing Address 2707 Grove Street South

City State Zip Code  
Arlington VA 22202-2423

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

Name of Employer Occupation  
The Mondello Group LLC Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11A1.7443**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John S. Moody**

Mailing Address 3263 Reba Dr

City State Zip Code  
Houston TX 77019

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

Name of Employer Occupation  
Parkside Capital Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11A1.7445**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Kristen Mynar**

Mailing Address 2605 Woodmont Cir

City State Zip Code  
Waco TX 76710

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

Name of Employer Occupation  
Naman Howell Smith & Lee Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7447**

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

**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 29 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Othel M. Neely**

Mailing Address 1620f W Loop 340

City Waco	State TX	Zip Code 76712
--------------	-------------	-------------------

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  
1875.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11A1.7448**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Trisha Neely**

Mailing Address 610 Bentley Mnr

City Shavano Park	State TX	Zip Code 78249
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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  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11A1.7450**

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
**Norman Nossaman**

Mailing Address 5419 Lake Charles Dr

City Waco	State TX	Zip Code 76710
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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  
250.00

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

**Transaction ID : SA11A1.7452**

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

**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 30 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael O'Quinn**

Mailing Address 3708 Park Meadow Ln

City State Zip Code  
Bryan TX 77802

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

Name of Employer Occupation  
Texas A&M University Govt. Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2014

**Transaction ID : SA11AI.7455**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Senator Steve Ogden**

Mailing Address 3740 Copperfield Dr Ste 103

City State Zip Code  
Bryan TX 77802

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

Name of Employer Occupation  
The State of Texas Senator

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  
05 / 05 / 2014

**Transaction ID : SA11AI.7454**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Jory Pacht**

Mailing Address 18 Pembroke St

City State Zip Code  
Sugar Land TX 77479

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

Name of Employer Occupation  
Pintail Oil and Gas CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.7457**

Amount of Each Receipt this Period  
2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William R. Pakis**

Mailing Address 1431 Lake Air Dr

City Waco	State TX	Zip Code 76710
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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  
5200.00

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

**Transaction ID : SA11A1.7458**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Catherine Patterson**

Mailing Address 899 Hodge Rd

City Eddy	State TX	Zip Code 76524
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FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Consultants of Texas	Occupation Radiologist
--	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7460**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Doyle R Pendleton Jr.**

Mailing Address 12916 Schleicher Trl

City Austin	State TX	Zip Code 78732
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Financial Planner
--------------------------	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11A1.7462**

Amount of Each Receipt this Period  
750.00

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

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

4350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Perry**

Mailing Address 9914 Burgundy Ln

City Waco	State TX	Zip Code 76712
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FEC ID number of contributing federal political committee. **C**

Name of Employer McClennan County	Occupation Commissioner
--------------------------------------	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7464**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen M. Pinkos**

Mailing Address 3612 Autumn Dr

City Fort Worth	State TX	Zip Code 76109
--------------------	-------------	-------------------

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  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7466**

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara Purselley**

Mailing Address 7212 Sandera Dr

City Waco	State TX	Zip Code 76710
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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  
 06 / 25 / 2014

**Transaction ID : SA11A1.7468**

Amount of Each Receipt this Period  
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Wayne Purseley</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 7212 Sandera Dr		<b>Transaction ID : SA11A1.7470</b>	
City Waco	State TX	Zip Code 76710	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self Employed	Occupation Real Estate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Helen R. Quiram</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address 5613 Hawthorne Dr		<b>Transaction ID : SA11A1.7471</b>	
City Waco	State TX	Zip Code 76710	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer American-Amicable Life Ins. Co.	Occupation Leasing Agent		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Carl F. Raba Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address PO Box 690287		<b>Transaction ID : SA11A1.7472</b>	
City San Antonio	State TX	Zip Code 78269	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Raba-Kistner Consultants, Inc.	Occupation Engineer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 34 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Karl Radde**

Mailing Address 2106 Highway 21 E

City State Zip Code  
Bryan TX 77803

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

Name of Employer Occupation  
Southern Comfort Homes Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11A1.7474**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. A. Harry Reed**

Mailing Address 1029 Austin Ave

City State Zip Code  
Waco TX 76701

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

Name of Employer Occupation  
Self Employed Florist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11A1.7476**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Taylor Reid**

Mailing Address 402 Shadywood Rd

City State Zip Code  
Houston TX 77057

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

Name of Employer Occupation  
Oasis Petroleum COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11A1.7478**

Amount of Each Receipt this Period  
2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

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

Mailing Address 906 Winged Foot Dr

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
Redtail Equipment Rental, LLC Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2014

**Transaction ID : SA11AI.7480**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Edith Reitmeier**

Mailing Address 308 Stone Creek Cir

City State Zip Code  
Mc Gregor TX 76657

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 / D D / Y Y Y Y  
06 / 21 / 2014

**Transaction ID : SA11AI.7482**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. C. Clifton Robinson**

Mailing Address PO Box 2028

City State Zip Code  
Waco TX 76703

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

Name of Employer Occupation  
National Group Corp. Chairman of the Board/Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11AI.7483**

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

**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 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tom Salome</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 1019 Chapman Rd		<b>Transaction ID : SA11A1.7484</b>	
City Crawford	State TX	Zip Code 76638	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Tom Salome Investments	Occupation Business Owner		Amount of Each Receipt this Period 3600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>B. Harold Samuels</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address 370 Elm Grove Cir		<b>Transaction ID : SA11A1.7485</b>	
City McGregor	State TX	Zip Code 76657	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Samuels and Associates	Occupation Co-Owner		Amount of Each Receipt this Period 525.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles W. Seely</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 815 W 10th St		<b>Transaction ID : SA11A1.7632</b>	
City Fort Worth	State TX	Zip Code 76102	Amount of Each Receipt this Period 1589.81 In-kind - catering
FEC ID number of contributing federal political committee. C			
Name of Employer Seely Oil Co.	Occupation President		Amount of Each Receipt this Period 1589.81
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4689.81
<b>TOTAL</b> This Period (last page this line number only).....	4689.81

**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 37 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Charles W. Seely</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address 815 W 10th St		<b>Transaction ID : SA11AI.7487</b>	
City Fort Worth	State TX	Zip Code 76102	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Seely Oil Co.	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1839.81		

Full Name (Last, First, Middle Initial) <b>B. Mr. Joe E. Sharp</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 4009 Airport Fwy		<b>Transaction ID : SA11AI.7488</b>	
City Bedford	State TX	Zip Code 76021	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer First Baird Bancshares, Inc.	Occupation Chairman of Bank		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3600.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Lisa Sheldon</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 4006 Green Oak Dr		<b>Transaction ID : SA11AI.7490</b>	
City Waco	State TX	Zip Code 76710	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self Employed	Occupation Real Estate Development		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 38 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

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

Mailing Address 454 Comanche Trl

City State Zip Code  
China Spring TX 76633

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

Name of Employer Occupation  
F.M Short Company Real Estate, Oil and Gas

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11AI.7492**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Cullen Smith**

Mailing Address 447 Meandering Way

City State Zip Code  
China Spring TX 76633

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

Name of Employer Occupation  
Naman Howell Smith & Lee, PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11AI.7494**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Clifford Spiegelman**

Mailing Address 10528 Dogwood Trl

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
TAMU Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11AI.7495**

Amount of Each Receipt this Period  
50.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Alice Starr</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 1 Bear PI Unit 97004		<b>Transaction ID : SA11AI.7496</b>
City Waco	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Starr Strategies	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John J. Stocker</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 119 76 W. Melchior Dr. N		<b>Transaction ID : SA11AI.7497</b>
City Santa Claus	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Global Transport Group	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. John J. Stocker</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address PO Box 119 76 W. Melchior Dr. N		<b>Transaction ID : SA11AI.7498</b>
City Santa Claus	State IN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Global Transport Group	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 40 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Elton E. Stuckly Jr.**

Mailing Address 1756 Ross Rd

City Elm Mott State TX Zip Code 76640

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

Name of Employer Texas State Technical College Waco Occupation College President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

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

**Transaction ID : SA11A1.7499**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas D. Swann**

Mailing Address 2703 Cresthill Cir

City Waco State TX Zip Code 76710

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

Name of Employer Naman, Howell, Smith & Lee Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11A1.7500**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Vorderkuz**

Mailing Address 215 White Hall Rd

City Woodway State TX Zip Code 76712

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

Name of Employer Custom Printing II, Ltd Occupation Purchasing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11A1.7501**

Amount of Each Receipt this Period  
200.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Waldie**

Mailing Address 4908 Park Row Pl

City State Zip Code  
Bryan TX 77802

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  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : SA11AI.7502**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Kathaleen Wall**

Mailing Address 6632 Rodrigo St

City State Zip Code  
Houston TX 77007

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

Name of Employer Occupation  
Self Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11AI.7504**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Greta Watson**

Mailing Address 2600 Washington Ave

City State Zip Code  
Waco TX 76710

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11AI.7506**

Amount of Each Receipt this Period  
500.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Murray Watson Jr.**

Mailing Address 2600 Washington Ave

City State Zip Code  
Waco TX 76710

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

Name of Employer Occupation  
Murray Watson, Jr. & Associates Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11AI.7507**

Amount of Each Receipt this Period  
2100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Darren Wilcox**

Mailing Address 9696 Mill Ridge Ln

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
W Strategies Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.7509**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tommy Williams**

Mailing Address 8 Hornsilver Pl

City State Zip Code  
The Woodlands TX 77381

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

Name of Employer Occupation  
Texas A&M University Govt. Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11AI.7511**

Amount of Each Receipt this Period  
1000.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 112
	<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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Wiseman**

Mailing Address 3023 Iron Stone Ct

City San Antonio State TX Zip Code 78230

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 Y Y  
 06 / 25 / 2014

**Transaction ID : SA11AI.7513**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

96198.81

**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 44 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE PAC**

Mailing Address 1 N Waukegan Rd

City North Chicago State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7562**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ACP Services**

Mailing Address 25 Massachusetts Ave NW Ste 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00403881

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7563**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ACSPA-Surgeons PAC**

Mailing Address 20 F St NW Ste 1000

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00382424

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7564**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilots Association (AOPA) PAC**

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11C.7565**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilots Association (AOPA) PAC**

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.7566**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Allergan Inc. PAC for Employees**

Mailing Address 2148 E Orangeview Ln

City State Zip Code  
Orange CA 92867

FEC ID number of contributing federal political committee. **C** C00292102

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.7567**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Altria Group, Inc. Political Action Committee (AltriaPAC)**

Mailing Address 101 Constitution Ave NW Ste 400w

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : SA11C.7568**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Academy of Dermatology Association Political Action Committee (SkinPAC)**

Mailing Address 1445 New York Ave NW Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7569**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**American Academy of Ophthalmology PAC**

Mailing Address 1101 Vermont Ave NW Ste 700

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7570**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**American College of Cardiology PAC**

Mailing Address 2400 N St NW # Lbby

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7571**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**American College of Radiology Association PAC (RADPAC)**

Mailing Address 1891 Preston White Dr

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7572**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**American College of Radiology Association PAC (RADPAC)**

Mailing Address 1891 Preston White Dr

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7573**

Amount of Each Receipt this Period  
 1500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOC. PAC**

Mailing Address 25 Massachusetts Ave NW Ste 600

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C30001309

Name of Employer	Occupation
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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  
 06 / 21 / 2014

**Transaction ID : SA11C.7574**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Osteopathic Information Association Osteopathic PAC**

Mailing Address 1090 Vermont Ave NW Ste 510

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00113803

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7575**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Petroleum Institute Political Action Committee (API PAC)**

Mailing Address 1220 L St NW

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00483677

Name of Employer	Occupation
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7576**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 3000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists (ASAPAC)**

Mailing Address 1501 M St NW Ste 300

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C70004684**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7577**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Amgen**

Mailing Address 601 13Th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00251876**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7578**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Anadarko Petroleum Corporation PAC**

Mailing Address 1201 Lake Robbins Dr  
Anadarko

City The Woodlands State TX Zip Code 77380

FEC ID number of contributing federal political committee. **C C00231951**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7579**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**APA PAC**

Mailing Address 1000 Wilson Blvd Ste 1825

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00373696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11C.7580**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Federal PAC**

Mailing Address 208 S. Akard Street, Suite 2701

City State Zip Code  
Dallas TX 75202

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 05 / 2014

**Transaction ID : SA11C.7581**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Automotive Free International Trade PAC**

Mailing Address 1625 Prince St Ste 225

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C C00250399**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11C.7582**

Amount of Each Receipt this Period  
3000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BP North America Employee PAC**

Mailing Address 501 Westlake Park Blvd

City Houston State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C** C00033530

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.7583**

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
**BrainPAC**

Mailing Address 201 Chicago Ave

City Minneapolis State MN Zip Code 55415

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7584**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Brinker International, Inc. PAC**

Mailing Address 6820 LBJ Fwy

City Dallas State TX Zip Code 75240

FEC ID number of contributing federal political committee. **C** C00241851

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4642.86

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11C.7585**

Amount of Each Receipt this Period  
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A. Caterpillar Employees Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 NE Adams St

City Peoria State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7586**

Amount of Each Receipt this Period  
 2500.00

**B. Chesapeake Energy Corporation Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 18576

City Oklahoma City State OK Zip Code 73154

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11C.7587**

Amount of Each Receipt this Period  
 5000.00

**C. Chevron Employees Fed PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6016

City San Ramon State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7588**

Amount of Each Receipt this Period  
 2000.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cognizant Technology Solutions PAC**

Mailing Address 500 Frank W Burr Blvd

City Teaneck State NJ Zip Code 07666

FEC ID number of contributing federal political committee. **C C00485979**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : SA11C.7589**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ConoccoPhillips**

Mailing Address 720 N Plaza Office Building

City Bartlesville State OK Zip Code 74004

FEC ID number of contributing federal political committee. **C C00112896**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.7590**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Credit Union Legislative Action Council**

Mailing Address 601 Pennsylvania Ave NW Ste 600 South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7591**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>DECPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2014
Mailing Address 333 W Sheridan Ave		<b>Transaction ID : SA11C.7592</b>
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. <b>C C00354753</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Doctor Voice 4 For Patient Choice PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2014
Mailing Address 4040 Macarthur Blvd Ste 210		<b>Transaction ID : SA11C.7593</b>
City Newport Beach	State CA	
FEC ID number of contributing federal political committee. <b>C C00527796</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>ENTPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 1650 Diagonal Rd		<b>Transaction ID : SA11C.7594</b>
City Alexandria	State VA	
FEC ID number of contributing federal political committee. <b>C C00306449</b>		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 55 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ernst & Young PAC**

Mailing Address 1101 New York Ave NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11C.7595**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ExxonMobil PAC**

Mailing Address 5959 Las Colinas Blvd

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : SA11C.7596**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**General Dynamics Corporation Political Action Committee**

Mailing Address 2941 Fairview Park Dr Ste 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.7597**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Halliburton Company PAC**

Mailing Address 10200 Bellaire Blvd

City Houston State TX Zip Code 77072

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : SA11C.7598**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**IPAA Wildcatters Fund**

Mailing Address 1201 15th St NW Ste 300

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7599**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JPMorgan Chase & Co. Political Action Committee**

Mailing Address 10 S Dearborn St

City Chicago State IL Zip Code 60603

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7600**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kirby Corporation Political Action Committee**

Mailing Address 55 Waugh Dr Ste 1000

City Houston State TX Zip Code 77007

FEC ID number of contributing federal political committee. **C** C00250027

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11C.7601**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**KochPAC**

Mailing Address 600 14th St NW Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11C.7602**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**KochPAC**

Mailing Address 600 14th St NW Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7603**

Amount of Each Receipt this Period  
 3000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KPMG PAC**

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7604**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**L-3 Communications Corporation PAC**

Mailing Address 600 3rd Ave

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C C00338087**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7605**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees' PAC**

Mailing Address 2121 Crystal Dr Ste 100

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11C.7606**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees' PAC**

Mailing Address 2121 Crystal Dr Ste 100

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7607**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees' PAC**

Mailing Address 2121 Crystal Dr Ste 100

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7608**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Marathon Oil Company Employees PAC**

Mailing Address 539 S Main St Rm 2635

City State Zip Code  
Findlay OH 45840

FEC ID number of contributing federal political committee. **C** C00040568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : SA11C.7609**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mednax Inc PAC-Jaime Capelo</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th St Ste 870		<b>Transaction ID : SA11C.7610</b>	
City Austin State TX Zip Code 78701	Amount of Each Receipt this Period 1600.00		
FEC ID number of contributing federal political committee. <b>C C00469205</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00		

Full Name (Last, First, Middle Initial) <b>B. National Association of Mutual Insurance Companies PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 3601 Vincennes Rd		<b>Transaction ID : SA11C.7611</b>	
City Indianapolis State IN Zip Code 46268	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. <b>C C00170258</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>C. National Association of Real Estate Investment Trusts, Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 1875 I St NW Ste 600		<b>Transaction ID : SA11C.7612</b>	
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C C00303339</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A. National Beer Wholesalers Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 King St Ste 600  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C C00144766**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 11000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11C.7613**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Chicken Council**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St NW # 830  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00034272**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11C.7615**  
 Amount of Each Receipt this Period  
 1000.00

**C. National Chicken Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St NW # 830  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00034272**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11C.7614**  
 Amount of Each Receipt this Period  
 1000.00

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A. National Emergency Medicine PAC (NEMPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 619911  
 City State Zip Code  
 Dallas TX 75261  
 FEC ID number of contributing federal political committee. **C** C00140061  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 8500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014  
**Transaction ID : SA11C.7616**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Ocean Industries Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 G St NW Ste 900  
 City State Zip Code  
 Washington DC 20005  
 FEC ID number of contributing federal political committee. **C** C00409565  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2014  
**Transaction ID : SA11C.7617**  
 Amount of Each Receipt this Period  
 2500.00

**C. NRG Energy PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 Congress Ave Ste 1000  
 City State Zip Code  
 Austin TX 78701  
 FEC ID number of contributing federal political committee. **C** C00366559  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11C.7618**  
 Amount of Each Receipt this Period  
 1000.00

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NuStar Energy PAC**

Mailing Address **PO Box 696000**

City **San Antonio** State **TX** Zip Code **78269**

FEC ID number of contributing federal political committee. **C C00435321**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11C.7619**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1500.00**

\_\_\_\_\_ **1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**OXPAC**

Mailing Address **10889 Wilshire Blvd**

City **Los Angeles** State **CA** Zip Code **90024**

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11C.7620**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

\_\_\_\_\_ **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Political Action Committee of the AAOS**

Mailing Address **317 Massachusetts Ave NE**

City **Washington** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00110205**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : SA11C.7621**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

\_\_\_\_\_ **5000.00**

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

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

\_\_\_\_\_ **7500.00**

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**South Texas Sugar Cane Producers PAC**

Mailing Address P.O. Drawer A

City Santa Rosa State TX Zip Code 78593

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  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7625**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**The American Congress of OB-GYNS (OB-GYN PAC)**

Mailing Address 409 12Th St SW

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11C.7626**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**The American Congress of OB-GYNs PAC**

Mailing Address 409 12Th St SW

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : SA11C.7627**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**United for Health PAC**

Mailing Address 701 Pennsylvania Ave NW Ste 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7628**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc. Good Government Club**

Mailing Address 1300 I St NW Lowr 4

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00025163**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11C.7629**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Western Energy Alliance Political Action Committee**

Mailing Address 410 17th St Ste 700

City Denver State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C C00426569**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11C.7630**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 112
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**BILL FLORES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WPX Energy, Inc. Political Action Committee**

Mailing Address 1001 7th St NE Ste 1200

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00502518

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11C.7631**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

124100.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 112			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 17375.56
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Telephone, catering, airfare, lodging, storage, fuel, shipping, parking... (see below if itemized)	Transaction ID : SB17.6900
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 29.95
City Hollywood	State CA	
Zip Code 90028-6117	Purpose of Disbursement Telephone service	Transaction ID : SB17.6900.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hyatt Regency DFW</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2334 N International Pkwy		Amount of Each Disbursement this Period 356.84
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Lodging	Transaction ID : SB17.6900.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17375.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 4166.20
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : SB17.6900.2</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. Ninfa's College Station</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1007 Earl Rudder Freeway South		Amount of Each Disbursement this Period 437.08
City College Station	State TX Zip Code 77845	
Purpose of Disbursement Catering	Category/Type	<b>Transaction ID : SB17.6900.3</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>C. Rustico Ristorante</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 114 E. Colorado Ave.		Amount of Each Disbursement this Period 4564.00
City Telluride	State CO Zip Code 81435	
Purpose of Disbursement Catering	Category/Type	<b>Transaction ID : SB17.6900.4</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 32.86
City Philadelphia	State PA Zip Code 19170-0001	
Purpose of Disbursement Express shipping	Candidate Name	Transaction ID : SB17.6900.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. EAN Holdings, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 728 N Earl Rudder Fwy		Amount of Each Disbursement this Period 207.01
City Bryan	State TX Zip Code 77802-2914	
Purpose of Disbursement Rental car	Candidate Name	Transaction ID : SB17.6900.8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 909.06
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Meal expenses	Candidate Name	Transaction ID : SB17.6900.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Upstream Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 2255.66
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation Capture Fees	
Candidate Name	Category/Type	<b>Transaction ID : SB17.6900.11</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 942 S Shady Grove Rd		Amount of Each Disbursement this Period 68.64
City Memphis State TN Zip Code 38119	Purpose of Disbursement Express shipping	
Candidate Name	Category/Type	<b>Transaction ID : SB17.6900.12</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hilton Palacio Del Rio</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 200 S Alamo St		Amount of Each Disbursement this Period 220.66
City San Antonio State TX Zip Code 78205	Purpose of Disbursement Lodging	
Candidate Name	Category/Type	<b>Transaction ID : SB17.6900.13</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rosa Mexicano</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 575 7th St NW		Amount of Each Disbursement this Period 2518.89
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Catering	Transaction ID : SB17.6900.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brazos Moving and Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2704 Boonville Road		Amount of Each Disbursement this Period 179.95
City Bryan	State TX	
Zip Code 77808-2228	Purpose of Disbursement Storage rental	Transaction ID : SB17.6900.16
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 501 Hewitt Drive		Amount of Each Disbursement this Period 150.00
City Waco	State TX	
Zip Code 76712-6411	Purpose of Disbursement Storage rental	Transaction ID : SB17.6900.17
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 40.36
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone service	Transaction ID : SB17.6900.18
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. INTUIT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 29.81
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Software service	Transaction ID : SB17.6900.19
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 665.00
City Dfw Airport	State TX	
Zip Code 75261-9612	Purpose of Disbursement Airfare	Transaction ID : SB17.6900.20
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Telski Restaurant - Telluride Ski Resort</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 565 Mountain Village Blvd.		Amount of Each Disbursement this Period 28.97
City Telluride	State CO Zip Code 81435	
Purpose of Disbursement Meal expense	Candidate Name	Transaction ID : SB17.6900.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 6520.44
City Dallas	State TX Zip Code 75265-0448	
Purpose of Disbursement Fuel, parking, transportation, website, telephone, software, lodging (see below if itemized)	Candidate Name	Transaction ID : SB17.7192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. EAN Holdings, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 728 N Earl Rudder Fwy		Amount of Each Disbursement this Period 3.62
City Bryan	State TX Zip Code 77802-2914	
Purpose of Disbursement Toll fees	Candidate Name	Transaction ID : SB17.7192.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6520.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Big's 108</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 4301 Boonville Rd.		Amount of Each Disbursement this Period 135.55
City Bryan	State TX	
Zip Code 77802	Purpose of Disbursement Fuel	Transaction ID : SB17.7192.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 123.85
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Disbursement Express shipping	Transaction ID : SB17.7192.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Omni Galleria Houston</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address Four Riverway		Amount of Each Disbursement this Period 262.06
City Houston	State TX	
Zip Code 77056	Purpose of Disbursement Lodging	Transaction ID : SB17.7192.5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DNC Holdings, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 3500 N. Causeway Blvd., Ste. 160		Amount of Each Disbursement this Period 53.79
City Metairie	State LA	
Zip Code 70002		
Purpose of Disbursement Website domain renewal		Category/ Type
Candidate Name		
Office Sought:	House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 29.95
City Hollywood	State CA	
Zip Code 90028-6117		
Purpose of Disbursement Telephone service		Category/ Type
Candidate Name		
Office Sought:	House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 501 Hewitt Drive		Amount of Each Disbursement this Period 150.00
City Waco	State TX	
Zip Code 76712-6411		
Purpose of Disbursement Storage rental		Category/ Type
Candidate Name		
Office Sought:	House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Brazos Moving and Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2704 Boonville Road		Amount of Each Disbursement this Period 179.95
City Bryan	State TX	
Zip Code 77808-2228	Purpose of Disbursement Storage rental	Transaction ID : SB17.7192.9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2121 E WM J Bryan Pkwy		Amount of Each Disbursement this Period 49.00
City Bryan	State TX	
Zip Code 77801-9998	Purpose of Disbursement Stamps	Transaction ID : SB17.7192.10
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Upstream Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 2293.55
City Austin	State TX	
Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation _Capture Fees	Transaction ID : SB17.7192.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FedEx Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 942 S Shady Grove Rd		Amount of Each Disbursement this Period 32.54
City Memphis	State TN	
Zip Code 38119	Purpose of Disbursement Express shipping	Transaction ID : SB17.7192.12
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 40.68
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone service	Transaction ID : SB17.7192.13
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. INTUIT</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 29.81
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Software service	Transaction ID : SB17.7192.14
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. La Posada</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 330 E. Palace Ave.		Amount of Each Disbursement this Period 319.00
City Santa Fe	State NM	
Zip Code 87501	Purpose of Disbursement Lodging	Transaction ID : SB17.7192.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Luxe Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 11461 Sunset Blvd.		Amount of Each Disbursement this Period 1335.73
City Los Angeles	State CA	
Zip Code 90049	Purpose of Disbursement Lodging, transportation	Transaction ID : SB17.7192.17
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 8774.13
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Telephone, shipping, website, telephone, meal expenses, parking, donor gifts (see below if itemized)	Transaction ID : SB17.7225
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8774.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FedEx Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 942 S Shady Grove Rd		Amount of Each Disbursement this Period 91.54
City Memphis	State TN	
Zip Code 38119	Purpose of Disbursement Express shipping	Transaction ID : SB17.7225.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Upstream Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1609 Shoal Creek Boulevard Suite 203		Amount of Each Disbursement this Period 4845.35
City Austin	State TX	
Zip Code 78701-1022	Purpose of Disbursement Website Hosting, Email Broadcast Services, Social Media Services, Donation Capture Fees	Transaction ID : SB17.7225.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. J2 Global Phone People</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 6922 Hollywood Boulevard		Amount of Each Disbursement this Period 29.95
City Hollywood	State CA	
Zip Code 90028-6117	Purpose of Disbursement Telephone service	Transaction ID : SB17.7225.3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Chick-Fil-A</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2200 Crystal Dr.		Amount of Each Disbursement this Period 226.23
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Meal expense	Transaction ID : SB17.7225.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 601 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 96.87
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Meal expense	Transaction ID : SB17.7225.5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Aaron's Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 501 Hewitt Drive		Amount of Each Disbursement this Period 150.00
City Waco	State TX	
Zip Code 76712-6411	Purpose of Disbursement Storage rental	Transaction ID : SB17.7225.7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 112	
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Brazos Moving and Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2704 Boonville Road		Amount of Each Disbursement this Period 179.95
City Bryan	State TX	
Zip Code 77808-2228	Purpose of Disbursement Storage rental	Transaction ID : SB17.7225.8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 49.68
City Philadelphia	State PA	
Zip Code 19170-0001	Purpose of Disbursement Express shipping	Transaction ID : SB17.7225.9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VONAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 23 Main Street		Amount of Each Disbursement this Period 46.63
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone service	Transaction ID : SB17.7225.10
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INTUIT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2632 Marine Way			Amount of Each Disbursement this Period 29.81
City Mountain View	State CA	Zip Code 94043-1126	
Purpose of Disbursement Software service		Category/ Type	<b>Transaction ID : SB17.7225.12</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

Full Name (Last, First, Middle Initial) <b>B. Big's 108</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 4301 Boonville Rd.			Amount of Each Disbursement this Period 26.10
City Bryan	State TX	Zip Code 77802	
Purpose of Disbursement Fuel		Category/ Type	<b>Transaction ID : SB17.7225.18</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 300 1st Street SE			Amount of Each Disbursement this Period 711.67
City Washington	State DC	Zip Code 20003-1801	
Purpose of Disbursement Meal expenses		Category/ Type	<b>Transaction ID : SB17.7225.19</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2702 Love Field Dr.			Amount of Each Disbursement this Period 296.00
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Airfare		Category/ Type	<b>Transaction ID : SB17.7225.20</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

Full Name (Last, First, Middle Initial) <b>B. One Thirty Five Prime</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 1201 Hewitt Dr.			Amount of Each Disbursement this Period 1215.17
City Waco	State TX	Zip Code 76712	
Purpose of Disbursement Catering-this disbursement is an in-kind contribution to Allen West Guardian Fund (FEC ID C0049322)		Category/ Type	<b>Transaction ID : SB17.7225.22</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

Full Name (Last, First, Middle Initial) <b>c. J Cody's Steak &amp; Barbeque</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 3610 S. College Station Ave.			Amount of Each Disbursement this Period 56.00
City Bryan	State TX	Zip Code 77801	
Purpose of Disbursement Catering		Category/ Type	<b>Transaction ID : SB17.7225.23</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.7262</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>B. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 4.00 <b>Transaction ID : SB17.7263</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>C. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.7264</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 32.80 <b>Transaction ID : SB17.7265</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>B. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : SB17.7266</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>C. American Express AMEX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 116.80 <b>Transaction ID : SB17.7267</b>
City Phoenix	State AZ	
Zip Code 85072-3852	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	157.55
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AUTHORIZE.NET</b>		Date of Disbursement
Mailing Address 1295 Charleston Road		M M / D D / Y Y Y Y 04 / 02 / 2014
City Mountain View	State CA	Zip Code 94043-1307
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 25.40	
Candidate Name	Transaction ID : SB17.7268	
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AUTHORIZE.NET</b>		Date of Disbursement
Mailing Address 1295 Charleston Road		M M / D D / Y Y Y Y 05 / 02 / 2014
City Mountain View	State CA	Zip Code 94043-1307
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 25.25	
Candidate Name	Transaction ID : SB17.7269	
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AUTHORIZE.NET</b>		Date of Disbursement
Mailing Address 1295 Charleston Road		M M / D D / Y Y Y Y 06 / 03 / 2014
City Mountain View	State CA	Zip Code 94043-1307
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 25.25	
Candidate Name	Transaction ID : SB17.7270	
Office Sought: <input type="checkbox"/> 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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	75.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bryan/College Station Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 3579		Amount of Each Disbursement this Period 335.00 <b>Transaction ID : SB17.7302</b>
City Bryan	State TX	
Zip Code 77805	Purpose of Disbursement Annual dues, luncheon registration	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period 100.70 <b>Transaction ID : SB17.7271</b>
City Portland	State ME	
Zip Code 04101-4177	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>c. E-Onlinedata</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 280 Fore Street		Amount of Each Disbursement this Period 2.78 <b>Transaction ID : SB17.7273</b>
City Portland	State ME	
Zip Code 04101-4177	Purpose of Disbursement Credit card fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	438.48
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 04 / 08 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 39.64
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 04 / 11 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 5.55
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 04 / 28 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 16.86
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62.05
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 02 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 39.47
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 08 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 203.84
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 05 / 28 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 16.86
Office Sought: <input type="checkbox"/> 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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	260.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 03 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 38.66	
Candidate Name	Transaction ID : SB17.7280	
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 17 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 44.75	
Candidate Name	Transaction ID : SB17.7281	
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 19 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period 4.44	
Candidate Name	Transaction ID : SB17.7282	
Office Sought: <input type="checkbox"/> 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:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	87.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 20 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 52.26
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 27 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 93.75
Office Sought: <input type="checkbox"/> 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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. E-Onlinedata</b>		Date of Disbursement
Mailing Address 280 Fore Street		M M / D D / Y Y Y Y 06 / 30 / 2014
City Portland	State ME	Zip Code 04101-4177
Purpose of Disbursement Credit card fees	Candidate Name	Amount of Each Disbursement this Period 3.76
Office Sought: <input type="checkbox"/> 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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	149.77
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.6899</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and compliance services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.7115</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and compliance services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>c. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.7152</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and compliance services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 2101 Cedar Springs Road Suite 1050		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.7299</b>
City Dallas State TX Zip Code 75201-2104	Purpose of Disbursement Legal and compliance services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 1600.00 <b>Transaction ID : SB17.6879</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - fundraising	
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>c. Lilly &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1005 Congress Avenue Suite 910		Amount of Each Disbursement this Period 8143.90 <b>Transaction ID : SB17.6890</b>
City Austin State TX Zip Code 78701-2467	Purpose of Disbursement Consulting - fundraising	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11743.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lilly &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1005 Congress Avenue Suite 910			Amount of Each Disbursement this Period 5428.76
City Austin	State TX	Zip Code 78701-2467	
Purpose of Disbursement Consulting - fundraising		Category/ Type	<b>Transaction ID : SB17.6891</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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:			

Full Name (Last, First, Middle Initial) <b>B. Lilly &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 1005 Congress Avenue Suite 910			Amount of Each Disbursement this Period 5592.07
City Austin	State TX	Zip Code 78701-2467	
Purpose of Disbursement Consulting - fundraising		Category/ Type	<b>Transaction ID : SB17.7118</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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:			

Full Name (Last, First, Middle Initial) <b>c. Lilly &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1005 Congress Avenue Suite 910			Amount of Each Disbursement this Period 4696.14
City Austin	State TX	Zip Code 78701-2467	
Purpose of Disbursement Consulting - fundraising		Category/ Type	<b>Transaction ID : SB17.7161</b>
Candidate Name			
Office Sought: <input type="checkbox"/> 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15716.97
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 112			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Limestone County Fair &amp; Stock Show</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014		
Mailing Address P.O. Box 965			Amount of Each Disbursement this Period 1000.00		
City Groesbeck	State TX	Zip Code 76642	Transaction ID : SB17.7113		
Purpose of Disbursement Add-on livestock bids		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> 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:					

Full Name (Last, First, Middle Initial) <b>B. Marathon Strategic Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014		
Mailing Address 3771 Vinecrest Dr.			Amount of Each Disbursement this Period 1500.00		
City Dallas	State TX	Zip Code 75229	Transaction ID : SB17.6888		
Purpose of Disbursement Consultant-Communications		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> 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:					

Full Name (Last, First, Middle Initial) <b>C. Marathon Strategic Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014		
Mailing Address 3771 Vinecrest Dr.			Amount of Each Disbursement this Period 1500.00		
City Dallas	State TX	Zip Code 75229	Transaction ID : SB17.7119		
Purpose of Disbursement Consultant-Communications		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Marathon Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 3771 Vinecrest Dr.		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.7162</b>
City Dallas State TX Zip Code 75229	Purpose of Disbursement Consultant-Communications	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. Jeff Moorehouse</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1505 Longworth Hob		Amount of Each Disbursement this Period 77.49 <b>Transaction ID : SB17.7155</b>
City Washington State DC Zip Code 20515	Purpose of Disbursement Reimbursement - meal expense (see below if itemized)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>c. Public Safety Insignia</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address P.O. Box 9077		Amount of Each Disbursement this Period 1136.25 <b>Transaction ID : SB17.7112</b>
City Surprise State AZ Zip Code 85374	Purpose of Disbursement Challenge coins	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2713.74
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 112		
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Reid Political Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3502 Halcyon Dr.		Amount of Each Disbursement this Period 7025.00 <b>Transaction ID : SB17.6889</b>
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Consulting - fundraising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>B. Mr. Charles W. Seely</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 815 W 10th St		Amount of Each Disbursement this Period 1589.81 <b>Transaction ID : SB17.7633</b>
City Fort Worth	State TX	
Zip Code 76102	Purpose of Disbursement In-kind - catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Susan Gage Caterers</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 7411 Livingston Rd.		Amount of Each Disbursement this Period 352.00 <b>Transaction ID : SB17.7291</b>
City Oxon Hill	State MD	
Zip Code 20745	Purpose of Disbursement Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8966.81
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 112			
	<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)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Triangle Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3810 Old College Rd.		Amount of Each Disbursement this Period 291.73 <b>Transaction ID : SB17.6887</b>
City Bryan	State TX	
Zip Code 77801	Purpose of Disbursement Storage rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>B. Triangle Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 3810 Old College Rd.		Amount of Each Disbursement this Period 291.73 <b>Transaction ID : SB17.7163</b>
City Bryan	State TX	
Zip Code 77801	Purpose of Disbursement Storage rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>c. United Parcel Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 316 Pennsylvania Avenue, SE Suite 300		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.7292</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Facility fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	783.46
<b>TOTAL</b> This Period (last page this line number only).....	83846.68

**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 101 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ALLEN WEST GUARDIAN FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 2140 THREE M TRAIL		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7116</b>
City DELAND State FL Zip Code 32720	Purpose of Disbursement PAC contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>B. BILL PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address PO Box 4528		Amount of Each Disbursement this Period 514.00 <b>Transaction ID : SB21.7261</b>
City Bryan State TX Zip Code 77805	Purpose of Disbursement PAC contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> 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:		

Full Name (Last, First, Middle Initial) <b>C. BOBBY SCHILLING FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 367 AVENUE OF THE CITIES SUITE D		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7188</b>
City EAST MOLINE State IL Zip Code 61244	Purpose of Disbursement Campaign contribution	
Candidate Name <b>ROBERT T. SCHILLING</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 17		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4514.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CARLOS CURBELO CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 8770 SUNSET DRIVE #355		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7130</b>
City MIAMI State FL Zip Code 33173	Purpose of Disbursement Campaign contribution	
Candidate Name <b>CARLOS CURBELO</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) <b>B. COFFMAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 4950 S YOSEMITE STREET F2 #511		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.7121</b>
City GREENWOOD VILLAGE State CO Zip Code 80111	Purpose of Disbursement Campaign contribution	
Candidate Name <b>MICHAEL COFFMAN</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 06		

Full Name (Last, First, Middle Initial) <b>C. COMSTOCK FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO BOX 71596		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7150</b>
City RICHMOND State VA Zip Code 23255	Purpose of Disbursement Campaign contribution	
Candidate Name <b>BARBARA J. COMSTOCK</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 10		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DOLD FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO BOX 6312		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7134</b>
City LIBERTYVILLE State IL Zip Code 60048	Purpose of Disbursement Campaign contribution	
Candidate Name <b>ROBERT JAMES JR DOLD</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 10		

Full Name (Last, First, Middle Initial) <b>B. ELIZABETH EMKEN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 525 E. SEASIDE WAY, #101-C		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.6895</b>
City LONG BEACH State CA Zip Code 90802	Purpose of Disbursement Campaign contribution	
Candidate Name <b>ELIZABETH EMKEN</b>		Category/ Type
Office Sought: <input checked="" 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: CA District: 07		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JOE HECK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO BOX 750114		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.7123</b>
City LAS VEGAS State NV Zip Code 89136	Purpose of Disbursement Campaign contribution	
Candidate Name <b>JOE HECK</b>		Category/ Type
Office Sought: <input checked="" 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: NV District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JOE HECK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO BOX 750114		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7124</b>
City LAS VEGAS	State NV Zip Code 89136	
Purpose of Disbursement Campaign contribution	Category/Type	
Candidate Name <b>JOE HECK</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 03	

Full Name (Last, First, Middle Initial) <b>B. HALL FOR CONGRESS COMMITTEE (RALPH HALL - ROCKWALL, TEXAS)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address POST OFFICE BOX 711		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.6886</b>
City ROCKWALL	State TX Zip Code 75087	
Purpose of Disbursement Campaign contribution	Category/Type	
Candidate Name <b>RALPH MOODY HALL</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 04	

Full Name (Last, First, Middle Initial) <b>C. HURD FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO BOX 656		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.7167</b>
City HELOTES	State TX Zip Code 78023	
Purpose of Disbursement	Category/Type	
Candidate Name <b>WILLIAM HURD</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 23	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JENKINS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO BOX 727		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7142</b>
City HUNTINGTON	State WV	
Zip Code 25711	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name <b>EVAN H JENKINS</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WV District: 03	

Full Name (Last, First, Middle Initial) <b>B. MCSALLY FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO BOX 19128		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7138</b>
City TUCSON	State AZ	
Zip Code 85731	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name <b>MARTHA E MS. MCSALLY</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 02	

Full Name (Last, First, Middle Initial) <b>C. MIKE BOST FOR CONGRESS COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO BOX 1212		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7146</b>
City MURPHYSBORO	State IL	
Zip Code 62966	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name <b>MICHAEL J BOST</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 12	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MOONEY FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address P.O. BOX 1863		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7184</b>
City MARTINSBURG	State WV	
Zip Code 25402	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name <b>ALEXANDER XAVIER MOONEY</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 06	

Full Name (Last, First, Middle Initial) <b>B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 12000.00 <b>Transaction ID : SB21.7168</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement Annual dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> 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:	

Full Name (Last, First, Middle Initial) <b>C. RICK W. ALLEN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address P. O. BOX 338		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7179</b>
City AUGUSTA	State GA	
Zip Code 30903	Purpose of Disbursement Campaign contribution	Category/ Type
Candidate Name <b>RICHARD W ALLEN</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 112	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**BILL FLORES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHERLAND FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO BOX 1692		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.7125</b>
City LYNN HAVEN State FL Zip Code 32444	Purpose of Disbursement Campaign contribution	
Candidate Name <b>WILLIAM STEVE II SOUTHERLAND</b>		Category/Type
Office Sought: <input checked="" 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: FL District: 02		

Full Name (Last, First, Middle Initial) <b>B. SOUTHERLAND FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO BOX 1692		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.7126</b>
City LYNN HAVEN State FL Zip Code 32444	Purpose of Disbursement Campaign contribution	
Candidate Name <b>WILLIAM STEVE II SOUTHERLAND</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 02		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	41014.00

**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)

Transaction ID : SC/10.4512

**BILL FLORES FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2010

**BILL FLORES**

Primary

General

Other (specify) ▼

Mailing Address  
PO BOX 6207

City State ZIP Code  
BRYAN TX 77805

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
250000.00 147250.00 102750.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 31 D /

Y 2009 Y

M M /

D D /

Y None 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)..... 102750.00

**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.

# 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)

Transaction ID : SC/10.4519

**BILL FLORES FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2010

**BILL FLORES**

Primary

General

Other (specify) ▼

Mailing Address  
PO BOX 6207

City State ZIP Code  
BRYAN TX 77805

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
225000.00	9750.00	185250.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 11 /

D 01 /

Y 2010 Y

M M /

D D /

Y None 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 185250.00
<b>TOTALS</b> 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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4519

(Current loan amount of 30000.00 from a balance of 225000.00 has been forgiven)

Form/Schedule:

Transaction ID:

**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) **Transaction ID : SC/10.4335**  
**BILL FLORES FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BILL FLORES</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 6207		

City	State	ZIP Code
BRYAN	TX	77805

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M 12 / D 31 / Y 2010	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	50000.00
<b>TOTALS</b> This Period (last page in this line only).....	338000.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**BILL FLORES FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**American Express**

Mailing Address PO Box 650448

City State Zip Code  
Dallas TX 75265-0448

Nature of Debt (Purpose):  
Donation, express shipping, lodging, meals, website, airfare, catering, office supplies

Outstanding Balance Beginning This Period **Transaction ID : SD10.7189**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
7373.30 0.00 7373.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gober Hilgers PLLC**

Mailing Address 2101 Cedar Springs Road Suite 1050

City State Zip Code  
Dallas TX 75201-2104

Nature of Debt (Purpose):  
Legal and Accounting Fees

Outstanding Balance Beginning This Period **Transaction ID : SD10.5821**  
2000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 2000.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Lilly & Company**

Mailing Address 1005 Congress Avenue Suite 910

City State Zip Code  
Austin TX 78701-2467

Nature of Debt (Purpose):  
Consulting - Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10.5819**  
9743.90

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 9743.90 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	7373.30
2) <b>TOTALS</b> This Period (last page this line number only) .....	7373.30
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	338000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	345373.30