

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

WEST MAIN STREET VALUES PAC INC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="25347.29"/>	<input type="text" value="25347.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="193511.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="100009.29"/>	<input type="text" value="293012.27"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="293520.29"/>	<input type="text" value="318359.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131988.77"/>	<input type="text" value="156828.04"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="161531.52"/>	<input type="text" value="161531.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

WEST MAIN STREET VALUES PAC INC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	100000.00	293000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	100000.00	293000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	100000.00	293000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9.29	12.27
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	100009.29	293012.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	100009.29	293012.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	25455.42	50294.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25455.42	50294.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	106533.35	106533.35
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	131988.77	156828.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131988.77	156828.04

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	100000.00	293000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100000.00	293000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	25455.42	50294.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	25455.42	50294.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
WEST MAIN STREET VALUES PAC INC

Full Name (Last, First, Middle Initial) A. Richard Chilton		Date of Receipt MM / DD / YYYY 05 / 20 / 2014 Transaction ID : SA11AI.4340
Mailing Address 9 Indian Spring Trail		Amount of Each Receipt this Period 50000.00
City Darlen	State CT	Zip Code 06820
FEC ID number of contributing federal political committee. C	Name of Employer Chilton Investment Co.	Occupation President/CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) B. Richard Roberts		Date of Receipt MM / DD / YYYY 04 / 04 / 2014 Transaction ID : SA11AI.4337
Mailing Address 123 Arbutus Dr.		Amount of Each Receipt this Period 25000.00
City Lakewood	State NJ	Zip Code 08701
FEC ID number of contributing federal political committee. C	Name of Employer Mutual Pharmacy Co.	Occupation Senior Advisor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) C. Doug Silverman		Date of Receipt MM / DD / YYYY 04 / 03 / 2014 Transaction ID : SA11AI.4335
Mailing Address 11 Fifth Ave. PH-L		Amount of Each Receipt this Period 25000.00
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. C	Name of Employer Senator Investment Group	Occupation Finance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	100000.00
TOTAL This Period (last page this line number only).....▶	100000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WEST MAIN STREET VALUES PAC INC

Full Name (Last, First, Middle Initial)

A. Covington & Burling

Mailing Address 1201 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Legal Fees

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.4348

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Ryan Gillespie

Mailing Address 214 Sir Francis Drake Way

City Liberty State SC Zip Code 29657

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.4344

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Holloway Consulting

Mailing Address 1101 16th St., NW
Ste. 401

City Washington State DC Zip Code 20036

Purpose of Disbursement
Fundraising Consulting

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.4346

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
WEST MAIN STREET VALUES PAC INC

Full Name (Last, First, Middle Initial)

A. Kickstand Studio

Mailing Address 1520 Main St., #1D

City Columbia State SC Zip Code 29201

Purpose of Disbursement
Online Ad Production-Adjust for IE-Paid 1/17/14

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SB21B.4321

Amount of Each Disbursement this Period

-4012.50

Full Name (Last, First, Middle Initial)

B. Piryx

Mailing Address 144 2nd St.
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Online Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Transaction ID : SB21B.4342

Amount of Each Disbursement this Period

1437.50

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

-2575.00

25409.82

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST MAIN STREET VALUES PAC INC
FEC IDENTIFICATION NUMBER C C00543157
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Google
Mailing Address 1600 Amphitheatre Pkwy
City Mountain View State CA Zip Code 94043
Purpose of Expenditure IE-Graham-Online Ads Category/Type 004
Name of Federal Candidate LINDSEY O GRAHAM Support
Calendar Year-To-Date Per Election for Office Sought 4512.50

Date of Public Distribution/Dissemination 04 / 01 / 2014
Amount 500.00
Transaction ID : SE.4318
Date of Disbursement or Obligation 04 / 14 / 2014
Office Sought: House District: 00
Senate State: SC
Disbursement For: Primary General
Other (specify)

Full Name of Payee Google
Mailing Address 1600 Amphitheatre Pkwy
City Mountain View State CA Zip Code 94043
Purpose of Expenditure IE-Graham-Online Ads Category/Type 004
Name of Federal Candidate LINDSEY O GRAHAM Support
Calendar Year-To-Date Per Election for Office Sought 13081.30

Date of Public Distribution/Dissemination 04 / 01 / 2014
Amount 268.80
Transaction ID : SE.4323
Date of Disbursement or Obligation 05 / 13 / 2014
Office Sought: House District: 00
Senate State: SC
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 768.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Le Price [Electronically Filed] Date 05 / 29 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST MAIN STREET VALUES PAC INC
FEC IDENTIFICATION NUMBER C C00543157
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications
Mailing Address 1043 Barr Rd.
City Lexington State SC Zip Code 29072
Purpose of Expenditure IE-Graham-Phone Banks Category/Type 004
Name of Federal Candidate LINDSEY O GRAHAM Support
Calendar Year-To-Date Per Election for Office Sought 85881.30

Date of Public Distribution/Dissemination 05/16/2014
Amount 1000.00
Transaction ID : SE.4325
Date of Disbursement or Obligation 05/16/2014
Office Sought: House District: 00
Senate State: SC
Disbursement For: Primary General 2014

Full Name of Payee Starboard Communications
Mailing Address 1043 Barr Rd.
City Lexington State SC Zip Code 29072
Purpose of Expenditure IE-Graham-Phone Banks Category/Type 004
Name of Federal Candidate LINDSEY O GRAHAM Support
Calendar Year-To-Date Per Election for Office Sought 104681.30

Date of Public Distribution/Dissemination 05/19/2014
Amount 18800.00
Transaction ID : SE.4333
Date of Disbursement or Obligation 05/19/2014
Office Sought: House District: 00
Senate State: SC
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 19800.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Le Price [Electronically Filed] Date 05/29/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST MAIN STREET VALUES PAC INC		FEC IDENTIFICATION NUMBER C C00543157
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Starboard Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014
Mailing Address 1043 Barr Rd.		Amount 1852.05
City Lexington	State SC	Zip Code 29072
Purpose of Expenditure IE-Graham-Online Email Blast	Category/Type 004	Transaction ID : SE.4324 Date of Disbursement or Obligation MM / DD / YYYY 05 / 20 / 2014
Name of Federal Candidate LINDSEY O GRAHAM	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought	106533.35	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Third Wave Communications		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 18 / 2014
Mailing Address 448 W. Nationwide Blvd Ste. 106		Amount 8300.00
City Columbus	State OH	Zip Code 43215
Purpose of Expenditure IE-Graham-Media Production	Category/Type 004	Transaction ID : SE.4312 Date of Disbursement or Obligation MM / DD / YYYY 05 / 13 / 2014
Name of Federal Candidate LINDSEY O GRAHAM	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought	12812.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10152.05
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	106533.35

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Le Price
Signature _____ [Electronically Filed] Date **05 / 29 / 2014**