

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE  
14 AUG 11 AM 9:29  
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.  
**Kevin Terrell for US Senate**

ADDRESS (number and street) **PO Box 19476**  
 Check if different than previously reported. (ACC)  
**Minneapolis MN 55419**

2. **FEC IDENTIFICATION NUMBER** **C 00564286**  
3. IS THIS REPORT  **NEW (N)** OR  **AMENDED (A)**  
CITY STATE ZIP CODE STATE DISTRICT  
**MN MN**

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 **08 / 12 / 2014** in the State of **MN**  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **07 / 01 / 2014** through **07 / 23 / 2014**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **Sean Nonhof** **KAVIN TERRELL**  
Signature of Treasurer **Sean Nonhof** *[Signature]* Date **08 / 05 / 2014**

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

14020660389

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Kevin Terrell for US Senate**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))...	2580.00	9556.48
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	2580.00	9556.48
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	3871.05	22177.78
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	3871.05	22177.78
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	4774.03	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	31000.00	

**For further information contact:**

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

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

14020660390

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 11

Write or Type Committee Name

**Kevin Terrell for US Senate**

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2014

To:

MM / DD / YYYY  
07 / 23 / 2014

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A) ...

2250.00

8661.48

(ii) Unitemized .....

330.00

895.00

(iii) TOTAL of contributions from individuals .

2580.00

9556.48

(b) Political Party Committees...

0.00

0.00

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

0.00

0.00

(d) The Candidate .....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

2580.00

9556.48

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

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

0.00

11500.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

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

0.00

11500.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

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

0.00

0.00

16. TOTAL RECEIPTS (add Lines

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

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

2580.00

21056.48

14020660391

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES...	3871.05	22177.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	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 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS...	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3871.05	22177.78

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	6065.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	2580.00
25. SUBTOTAL (add Line 23 and Line 24)...	8645.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	3871.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	4774.03

14020660392

**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 11	
	<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)  
**Kevin Terrell for US Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Lori Botzet**

Mailing Address **48897 Wild Rose Trl**

City **Frazee** State **MN** Zip Code **56544**

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

Name of Employer **Marine Innovations Inc** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  

MM	DD	YYYY
07	13	2014

Transaction ID : **SA11AI.4328**

Amount of Each Receipt this Period  

500.00
--------

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

Mailing Address **35505 SE English St**

City **Snoqualmie** State **WA** Zip Code **98065**

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

Name of Employer **Cognition Patemers** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  

MM	DD	YYYY
07	10	2014

Transaction ID : **SA11AI.4375**

Amount of Each Receipt this Period  

250.00
--------

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

Mailing Address **3003 130th Place NE**

City **Bellevue** State **WA** Zip Code **98005**

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

Name of Employer **Microsoft** Occupation **Training Leader**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  

MM	DD	YYYY
07	17	2014

Transaction ID : **SA11AI.4334**

Amount of Each Receipt this Period  

250.00
--------

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

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

**1000.00**

14020660393

**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)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kevin Terrell for US Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Roberts**

Mailing Address **2400 W. Lake of the Isles**

City **Minneapolis** State **MN** Zip Code **55405**

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

Name of Employer **self-employed** Occupation **self-employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **07 / 16 / 2014**

Transaction ID : **SA11AI.4332**

Amount of Each Receipt this Period **250.00**

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

Mailing Address **1218 Third Ave**

City **Seattle** State **WA** Zip Code **98101**

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

Name of Employer **Fluency Group** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 08 / 2014**

Transaction ID : **SA11AI.4128**

Amount of Each Receipt this Period **500.00**

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

Mailing Address **4901 Emerson Ave S**

City **Minneapolis** State **MN** Zip Code **55419**

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

Name of Employer **Consultant** Occupation **Self-Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **07 / 14 / 2014**

Transaction ID : **SA11AI.4330**

Amount of Each Receipt this Period **500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1250.00**

**TOTAL** This Period (last page this line number only)..... **2250.00**

14020660394

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Kevin Terrell for US Senate**

Full Name (Last, First, Middle Initial) <b>A. Clear Channel</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2014
Mailing Address 80 S. 8th Street		Amount of Each Disbursement this Period 1328.00 Transaction ID : SB17.4366
City Minneapolis	State MN	
Zip Code 55402	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" 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>B. Print Shop</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 136 West 98th St.		Amount of Each Disbursement this Period 364.74 Transaction ID : SB17.4373
City Bloomington	State MN	
Zip Code 55420	Purpose of Disbursement Flyers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" 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. Print Shop</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2014
Mailing Address 136 West 98th St.		Amount of Each Disbursement this Period 211.14 Transaction ID : SB17.4368
City Bloomington	State MN	
Zip Code 55420	Purpose of Disbursement Stickers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" 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).....	1903.88
<b>TOTAL</b> This Period (last page this line number only).....	

14020660395

**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 8 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Kevin Terrell for US Senate**

**A. Promo Source**

Full Name (Last, First, Middle Initial)  
Mailing Address 316 Palomino DR

City Apple Valley State MN Zip Code 55124

Purpose of Disbursement T-Shirts

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
07 / 01 / 2014

Amount of Each Disbursement this Period: 383.60

Transaction ID : SB17.4349

Category/Type

**B. Promo Source**

Full Name (Last, First, Middle Initial)  
Mailing Address 316 Palomino DR

City Apple Valley State MN Zip Code 55124

Purpose of Disbursement Stickers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
07 / 01 / 2014

Amount of Each Disbursement this Period: 548.22

Transaction ID : SB17.4379

Category/Type

**C. Promo Source**

Full Name (Last, First, Middle Initial)  
Mailing Address 316 Palomino DR

City Apple Valley State MN Zip Code 55124

Purpose of Disbursement Flyers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
07 / 06 / 2014

Amount of Each Disbursement this Period: 407.60

Transaction ID : SB17.4352

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1339.42

**TOTAL** This Period (last page this line number only)..... 3243.30

14020660396



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Kevin Terrell for US Senate** Transaction ID : **SC/10.4322**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Kevin Terrell for US Senate** [PERSONAL FUNDS] Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 19476

City State ZIP Code  
Minneapolis MN 55419

Original Amount of Loan **8000.00** Cumulative Payment To Date **0.00** Balance Outstanding at Close of This Period **8000.00**

**TERMS** Date Incurred **05/12/2014** Date Due **5/12/2015** Interest Rate **3.00** % (apr) Secured:  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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)... **8000.00**  
**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.

14020660397

**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

Transaction ID : SC/10.4324

NAME OF COMMITTEE (In Full)

Kevin Terrell for US Senate

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Kevin Terrell for US Senate

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
PO Box 19476

City State ZIP Code  
Minneapolis MN 55419

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11500.00	0.00	11500.00

**TERMS**

Date Incurred: M 05 / D 12 / Y 2014  
Date Due: M / D / Y 5/12/2015  
Interest Rate: 3.00 % (apr)  
Secured:  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)...

11500.00

**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.

14020660398

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Kevin Terrell for US Senate** Transaction ID : **SC/10.4323**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014  
**Kevin Terrell for US Senate**  
Mailing Address PO Box 19476  
 Primary  
 General  
 Other (specify) ▼

City State ZIP Code  
Minneapolis MN 55419

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
11500.00 0.00 11500.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
M 06 / D 26 / Y 2014 M M / D D / Y 6/26/2015 3.00 % (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)... ▶ 11500.00  
**TOTALS** This Period (last page in this line only) .. ▶ 31000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020660399

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

1007

U.S. POSTAGE  
PAID  
MINNEAPOLIS, MN  
55419  
AUG 06, 14  
AMOUNT  
\$19.99  
00060594-22



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LABEL MAY BE REQUIRED.



EPI3F July 2013 OD: 125 X 9.5



PS 10001000006

WRITE FIRMLY TO MAKE ALL COPIES LEGIBLE.

### CUSTOMER USE ONLY

PHONE: 612-555-1234

### PAYMENT BY ACCOUNT (if applicable)

### DELIVERY OPTIONS (Customer Use Only)

- SIGNATURE REQUIRED Note: The maker must check the "Signature Required" box if the maker: 1) Requests the addressee's signature; OR 2) Purchases return receipt; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery Required (additional fee, where available)
- 10:30 AM Delivery Required (additional fee, where available)
- Refer to USPS.com or local Post Office for availability.

TO: (PLEASE PRINT) \_\_\_\_\_ PHONE: \_\_\_\_\_

ZIP + 4 (U.S. ADDR. ES ONLY) \_\_\_\_\_

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.

\$100.00 Insurance Included.

### ORIGIN (POSTAL SERVICE USE ONLY)

1-Day  2-Day  Military  DPO

PO ZIP Code: 55419

Scheduled Delivery Date: 8/7/14

Date Accepted: 8/6/14

Time Accepted: 11 AM

Scheduled Delivery Time: 10:30 AM  12 NOON  3:00 PM

10:30 AM Delivery Fee: \$

Insurance Fee: \$

COO Fee: \$

Weight: 19.75 lbs.

Flat Rate:

Sunday/Holiday Premium Fee: \$

Acceptance Employee Initials: \$

Return Receipt Fee: \$

Line Animal Transportation Fee: \$

Total Postage & Fees: \$

### DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Address (MM/DD/YYYY) Time: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Employee Initials: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Employee Initials: \_\_\_\_\_

3-ADDRESSEE COPY



EK3949730A0US

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00709902071

JANCY ERICKSON  
SECRETARY

DANA C. MCCALLUM  
SUPERINTENDENT  
MAIL OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-71  
PHONE (202) 224-0322

United States Senate  
OFFICE OF THE SECRETARY  
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_ Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_ Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_ Postmark

USPS PRIORITY MAIL 8/6/14 Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_ Postmark

OVERNIGHT DELIVERY SERVICE:  
SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_ Date of Receipt

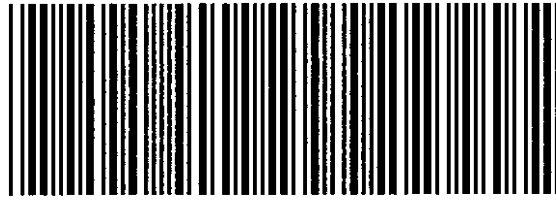
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_ Date of Receipt

OTHER \_\_\_\_\_ Date of Receipt or Postmark

PREPARER MN DATE PREPARED 8/11/14

14020660401



SEN PATCH



SEN PATCH

14020660402