

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

Office Use Only APR 13 PM 12:17

1. NAME OF COMMITTEE (in full) **BELL FOR SENATE**
TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**

ADDRESS (number and street) **PO BOX 31**
Check if different than previously reported. (ACC) **PALISADES PARK NJ 07650**

2. FEC IDENTIFICATION NUMBER ▼ **C00558122**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
NJ 00

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on M M D D Y Y in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M D D Y Y in the State of

5. Covering Period M M / D D Y Y through M M / D D Y Y
11 / 25 2014 through 12 / 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Rich Danker**

Signature of Treasurer Rich Danker Date **04 / 05 2016**

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

201604130200090415

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From: ^M 11 ^D 25 ^Y 2014 To: ^M 12 ^D 31 ^Y 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	350.00	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	350.00	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	5241.69	511383.76
(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))...	5241.69	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	8630.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	22027.63	

For further information contact:

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

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

201604130200090416

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From: ^{M M} 11 ^{D D} 25 ^{Y Y Y} 2014 To: ^{M M} 12 ^{D D} 31 ^{Y Y Y} 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)...	350.00	418104.93
(ii) Unitemized	0.00	83019.95
(iii) TOTAL of contributions from individuals	350.00	501124.88
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	65225.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	350.00	566349.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	35000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	35000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.08
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	350.00	601349.96

201604130200090417

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	5241.69	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ...	500.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	200.00
(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	200.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	5741.69	546583.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	14022.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	350.00
25. SUBTOTAL (add Line 23 and Line 24)...	14372.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	5741.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	8630.97

201604130200090418

**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 13
	<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)
BELL FOR SENATE

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

Mailing Address **62 Jordan Rd**

City **Willimantic** State **CT** Zip Code **06226**

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

Name of Employer **Self** Occupation **Insurance Sales**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 15 2014

Transaction ID : **SA11AI.8170**

Amount of Each Receipt this Period
250.00

Memo Item
2014 General Debt Retirement

B. Full Name (Last, First, Middle Initial)
Deborah Smarth

Mailing Address **144 Sweetmans Ln**

City **Manalapan** State **NJ** Zip Code **07726**

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

Name of Employer **NJ Business Development** Occupation **Chief Operating Officer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
12 15 2014

Transaction ID : **SA11AI.8172**

Amount of Each Receipt this Period
100.00

Memo Item
2014 General Debt Retirement

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

Amount of Each Receipt this Period

Memo Item

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

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

350.00

350.00

201604130200090419

**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 6 OF 13			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Julia Bell		Date of Disbursement M M / D D / Y Y 11 / 26 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 406.44 <input type="checkbox"/> Memo Item Transaction ID : SB17.8175
City Leonia	State NJ	
Purpose of Disbursement Expense Reimbursement	001	
Candidate Name BELL FOR SENATE		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. NJ Turnpike		Date of Disbursement M M / D D / Y Y 12 / 01 / 2014
Mailing Address PO Box 5042		Amount of Each Disbursement this Period 30.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.8175.0
City Woodbridge	State NJ	
Purpose of Disbursement Tolls	001	
Candidate Name BELL FOR SENATE		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. Julia Bell		Date of Disbursement M M / D D / Y Y 12 / 01 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 271.60 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.8175.1
City Leonia	State NJ	
Purpose of Disbursement Mileage	001	
Candidate Name BELL FOR SENATE		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	406.44
TOTAL This Period (last page this line number only).....	

201604130200090420

**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 13	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Morristown Diner		Date of Disbursement M M / D D / Y Y 12 / 01 / 2014	
Mailing Address 73 Morris St		Amount of Each Disbursement this Period 64.84	
City Morristown	State NJ	Zip Code 07960	001 Category/ Type
Purpose of Disbursement Food and Beverage		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name BELL FOR SENATE			Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ	District: 00	Transaction ID : SB17.8175.2

Full Name (Last, First, Middle Initial) B. Hillsdale Auto		Date of Disbursement M M / D D / Y Y 12 / 01 / 2014	
Mailing Address 333 Kinderkamack Road		Amount of Each Disbursement this Period 40.00	
City Hillsdale	State NJ	Zip Code 07642	001 Category/ Type
Purpose of Disbursement Gasoline		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name BELL FOR SENATE			Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ	District: 00	Transaction ID : SB17.8175.3

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement M M / D D / Y Y 12 / 01 / 2014	
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 566.46	
City Charlotte	State NC	Zip Code 28272	009 Category/ Type
Purpose of Disbursement Credit Card Payment		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name BELL FOR SENATE			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ	District: 00	Transaction ID : SB17.8193

SUBTOTAL of Disbursements This Page (optional).....	566.46
TOTAL This Period (last page this line number only).....	.

201604130200090421

**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 13	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Capital One		Date of Disbursement M M / D D Y Y 12 01 2014
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 433.54
City Charlotte	State NC	
Zip Code 28272		<input type="checkbox"/> Memo Item Transaction ID : SB17.8194
Purpose of Disbursement Credit Card Payment	Category/ Type 009	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D Y Y 12 09 2014
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 150.00
City Wilmington	State DE	
Zip Code 19850		<input type="checkbox"/> Memo Item Transaction ID : SB17.8192
Purpose of Disbursement Credit Card Payment	Category/ Type 009	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. Gia Coluccio		Date of Disbursement M M / D D Y Y 12 01 2014
Mailing Address 310 Prospect Ave Apt. 331		Amount of Each Disbursement this Period 3000.00
City Hackensack	State NJ	
Zip Code 07601		<input type="checkbox"/> Memo Item Transaction ID : SB17.8186
Purpose of Disbursement Campaign Consulting	Category/ Type 001	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	3583.54
TOTAL This Period (last page this line number only).....	

201604130200090422

**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 9 OF 13	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Constant Contact		Date of Disbursement M M / D D Y Y 12 03 2014
Mailing Address 17 Battery Pl		Amount of Each Disbursement this Period 180.00
City New York	State NY	
Zip Code 10004	Purpose of Disbursement E-Mail Marketing	<input type="checkbox"/> Memo Item
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.8180
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement M M / D D Y Y 12 05 2014
Mailing Address 1600 Ampitheatre Pkwy		Amount of Each Disbursement this Period 70.00
City Mountain View	State CA	
Zip Code 94041	Purpose of Disbursement E-Mail Services	<input type="checkbox"/> Memo Item
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.8177
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement M M / D D Y Y Y 11 28 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 39.95
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Payroll	<input type="checkbox"/> Memo Item
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.8173
State: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional)	289.95
TOTAL This Period (last page this line number only)	

201604130200090423

**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 10 OF 13	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement M M D D Y Y Y 11 28 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 47.70
City Mountain View	State CA	
Purpose of Disbursement Accounting	001	<input type="checkbox"/> Memo Item Transaction ID : SB17.8174
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00		

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M D D Y Y Y 12 03 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 62.95
City Mountain View	State CA	
Purpose of Disbursement Accounting	001	<input type="checkbox"/> Memo Item Transaction ID : SB17.8181
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00		

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement M M D D Y Y Y 12 29 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 39.95
City Mountain View	State CA	
Purpose of Disbursement Payroll	001	<input type="checkbox"/> Memo Item Transaction ID : SB17.8182
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional).....	150.60
TOTAL This Period (last page this line number only).....	

201604130200090424

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. PEZZULLO FOR SENATOR		Date of Disbursement M M D D Y Y V 12 30 2014
Mailing Address PO BOX 7043		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item Transaction ID : SB18.8184
City FREEHOLD	State NJ	
Zip Code 07728		Category/ Type 011
Purpose of Disbursement Campaign Contribution		
Candidate Name BELL FOR SENATE		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 00	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M Y
Mailing Address		Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

201604130200090426

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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital One	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 71083	
City State Zip Code Charlotte NC 28272	

Outstanding Balance Beginning This Period 14993.33	Transaction ID : SD10.5743
Amount Incurred This Period 0.00	Payment This Period 433.54
	Outstanding Balance at Close of This Period 14559.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital One	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 71083	
City State Zip Code Charlotte NC 28272	

Outstanding Balance Beginning This Period 566.46	Transaction ID : SD10.6975
Amount Incurred This Period 0.00	Payment This Period 566.46
	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase	Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 15123	
City State Zip Code Wilmington DE 19850	

Outstanding Balance Beginning This Period 7617.84	Transaction ID : SD10.8167
Amount Incurred This Period 0.00	Payment This Period 150.00
	Outstanding Balance at Close of This Period 7467.84

1) SUBTOTALS This Period This Page (optional) ...	22027.63
2) TOTALS This Period (last page this line number only) ...	22027.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	22027.63

201604130200090427

Hand Delivered

201604130200090428

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED _____

Date of Receipt

HAND DELIVERED _____

Date of Receipt

4-13-16

USPS FIRST CLASS MAIL _____

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

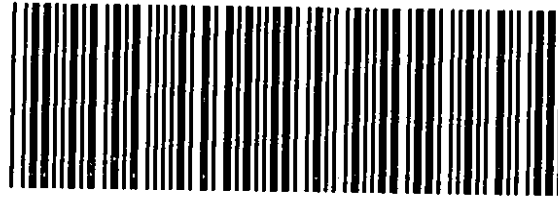
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PREPARER DH

DATE PREPARED 4-13-16

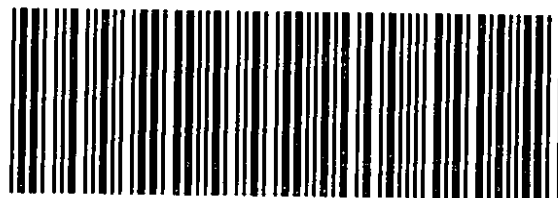
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