

**HAND DELIVERED**

**FEC  
FORM 3X**

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

RECEIVED  
2014 OCT 15 AM 9:39  
FEC MAIL CENTER  
Office Use Only

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

MID CONTINENT POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1101 K STREET NW

Check if different than previously reported. (ACC)

SUITE 425

WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

00011427

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

X

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on M M / C D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 01 20 14 through 09 30 20 14

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 ALBERT L MODIANO

Signature of Treasurer

*Albert L Modiano*

Date

10/15/2014

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

Office Use Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MID CONTINENT POLITICAL ACTION COMMITTEE

Report Covering the Period:

From: <sup>M M / D D / Y Y Y Y</sup> 07 / 01 / 2014

To: <sup>M M / D D / Y Y Y Y</sup> 09 / 30 / 2014

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <sup>Y Y Y Y</sup> 2014  |                         | 229,056.81                        |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 259,763.49              |                                   |
| (c) Total Receipts (from Line 19).....   | 500.00                  | 35,500.00                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....      | 260,263.49              | 264,556.81                        |
| 7. Total Disbursements (from Line 31).....   | 8,421.88                | 127,152.00                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                 | 251,841.61              | 251,841.61                        |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 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)

Page 3

Write or Type Committee Name

MID CONTINENT POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

07 01 2014

To:

09 30 2014

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 500.00                        | 35,500.00                         |
| (ii) Unitemized.....  |                               |                                   |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 500.00                        | 35,500.00                         |
| (b) Political Party Committees.....   |                               |                                   |
| (c) Other Political Committees (such as PACs).....  |                               |                                   |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶  | 500.00                        | 35,500.00                         |
| 12. Transfers From Affiliated/Other Party Committees.....   |                               |                                   |
| 13. All Loans Received.....   |                               |                                   |
| 14. Loan Repayments Received.....   |                               |                                   |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... |                               |                                   |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           |                               |                                   |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   |                               |                                   |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   |                               |                                   |
| (b) Levin Funds (from Schedule H5).....   |                               |                                   |
| (c) Total Transfers (add 18(a) and 18(b))..   |                               |                                   |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 500.00                        | 35,500.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 500.00                        | 35,500.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                   |                               |                                   |
| (i) Federal Share .....   |                               |                                   |
| (ii) Non-Federal Share .....  |                               |                                   |
| (b) Other Federal Operating Expenditures .....  |                               |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                         |                               |                                   |
| 22. Transfers to Affiliated/Other Party Committees .....  |                               |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....         | 8,100.00                      | 10,600.00                         |
| 24. Independent Expenditures (use Schedule E) .....   |                               |                                   |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....                   |                               |                                   |
| 26. Loan Repayments Made .....  |                               |                                   |
| 27. Loans Made .....  |                               |                                   |
| 28. Refunds of Contributions To:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   |                               |                                   |
| (b) Political Party Committees .....  |                               |                                   |
| (c) Other Political Committees (such as PACs) .....   |                               |                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            |                               |                                   |
| 29. Other Disbursements .....   | 321.88                        | 2,115.20                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))   |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                      |                               |                                   |
| (i) Federal Share .....   |                               |                                   |
| (ii) "Levin" Share .....  |                               |                                   |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            |                               |                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....             |                               |                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..       | 8,421.88                      | 12,715.20                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ..... | 8,421.88                      | 12,715.20                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 500.00                        | 35500.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 500.00                        | 35500.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....                | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 0.00                              |

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

|   |                  |   |                              |                              |                             |
|---|------------------|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: |   | PAGE 1 OF 1                  |                              |                             |
|   | (check only one) | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
|   |                  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <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)  
**MID CONTINENT POLITICAL ACTION COMMITTEE**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BOLGER, PERRY</b>   |   | Date of Receipt<br><b>07 / 31 / 2014</b>            |
| Mailing Address<br><b>P.O. Box 1782</b>  |   | Amount of Each Receipt this Period<br><b>250.00</b> |
| City<br><b>MIDLAND</b>   | State Zip Code<br><b>TX 79702</b>         |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   |   |
| Name of Employer   | Occupation                                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>250.00</b> |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SWEARINGEN, PATRICK H.</b>  |   | Date of Receipt<br><b>08 / 20 / 2014</b>            |
| Mailing Address<br><b>112 E PECAN ST #1800</b>   |   | Amount of Each Receipt this Period<br><b>250.00</b> |
| City<br><b>SAN ANTONIO</b>   | State Zip Code<br><b>TX 78205</b>         |   |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   |   |
| Name of Employer   | Occupation                                |   |
| Receipt For:<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>250.00</b> |   |

|   |                          |                 |
|---|--------------------------|-----------------|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |                          | Date of Receipt |
| Mailing Address   |                          |                 |
| City  | State Zip Code           |                 |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                          |                 |
| Name of Employer  | Occupation               |                 |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |                 |

|   |               |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶           | <b>500.00</b> |
| TOTAL This Period (last page this line number only).....▶ | <b>500.00</b> |

**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)

PAGE 1 OF 2

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" 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)

MID CONTINENT POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

|  |           |   |
|--|-----------|---|
| A. <u>GARDNER FOR SENATE</u>   |           | Date of Disbursement                    |
| Mailing Address<br><u>507 CAPITOL CT NE #100</u>   |           | <u>09 16 2014</u>                       |
| City   | State     | Zip Code                                |
| <u>WASHINGTON</u>  | <u>DC</u> | <u>20002</u>                            |
| Purpose of Disbursement<br><u>FUNDRAISER</u>   |           | Amount of Each Disbursement this Period |
| Candidate Name<br><u>CORY GARDNER</u>  |           |   |
| Office Sought: <input checked="" type="checkbox"/> House                                       |           | Category/Type                           |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |           |   |
| State: <u>CO</u> District: <u>4</u>  |           | <u>1,500.00</u>                         |

|  |           |   |
|--|-----------|---|
| B. <u>STEVEN DAINES FOR MONTANA</u>  |           | Date of Disbursement                    |
| Mailing Address<br><u>P.O. Box 1598</u>  |           | <u>09 16 2014</u>                       |
| City   | State     | Zip Code                                |
| <u>HELENA MT</u>   | <u>MT</u> | <u>59624</u>                            |
| Purpose of Disbursement<br><u>STEVEN DAINES FUNDRAISER</u>                                     |           | Amount of Each Disbursement this Period |
| Candidate Name<br><u>STEVEN DAINES</u>   |           |   |
| Office Sought: <input checked="" type="checkbox"/> House                                       |           | Category/Type                           |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |           |   |
| State: <u>MT</u> District:   |           | <u>2,500.00</u>                         |

|  |           |   |
|--|-----------|---|
| C. <u>RYAN ZINKE FOR CONGRESS</u>  |           | Date of Disbursement                    |
| Mailing Address<br><u>P O BOX 1596</u>   |           | <u>09 16 2014</u>                       |
| City   | State     | Zip Code                                |
| <u>HELENA</u>  | <u>MT</u> | <u>59624</u>                            |
| Purpose of Disbursement<br><u>FUNDRAISER</u>   |           | Amount of Each Disbursement this Period |
| Candidate Name<br><u>RYAN ZINKE</u>  |           |   |
| Office Sought: <input checked="" type="checkbox"/> House                                       |           | Category/Type                           |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |           |   |
| State: <u>MT</u> District: <u>2</u>  |           | <u>1,000.00</u>                         |

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

5,000.00

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)

PAGE 2 OF 2

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**MID CONTINENT POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A.** ROB BISHOP FOR CONGRESS Date of Disbursement: 09/17/2014

Mailing Address: 100 LUNA PARK DR # 156

City: ALEXANDRIA State: VA Zip Code: 22305

Purpose of Disbursement: FUNDRAISER Amount of Each Disbursement this Period: 260.00

Candidate Name: ROBERT W BISHOP Category/Type:

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)

State: UT District: 1

**B.** PALAZZO FOR CONGRESS Date of Disbursement: 09/17/2014

Mailing Address: P O Box 6217

City: GULFPORT State: MS Zip Code: 39506

Purpose of Disbursement: FUNDRAISER Amount of Each Disbursement this Period: 500.00

Candidate Name: STEVEN PALAZZO Category/Type:

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)

State: MS District: 4

**C.** \_\_\_\_\_ Date of Disbursement: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_ Amount of Each Disbursement this Period: \_\_\_\_\_

Candidate Name: \_\_\_\_\_ Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional).....▶ 3,100.00

TOTAL This Period (last page this line number only).....▶ 8,100.00

**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)

PAGE 1 OF 2

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**MID CONTINENT POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A.** A.T. & T. MOBILITY  
Mailing Address: P O BOX 536216  
City: ATLANTA State: GA Zip Code: 30353-6216  
Purpose of Disbursement: PHONE SERVICE  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) PHONE SVC.  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: 07 08 2014  
Amount of Each Disbursement this Period: 93.60  
Category/Type: \_\_\_\_\_

**B.** WASHINGTON EXPRESS  
Mailing Address: 12240 INDIAN CREEK CT # 100  
City: BELTSVILLE State: MD Zip Code: 20705  
Purpose of Disbursement: COURIER SVC.  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) COURIER SVC  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: 07 08 2014  
Amount of Each Disbursement this Period: 20.62  
Category/Type: \_\_\_\_\_

**C.** WASHINGTON EXPRESS  
Mailing Address: 12240 INDIAN CREEK CT #100  
City: BELTSVILLE State: MD Zip Code: 20705  
Purpose of Disbursement: COURIER SVC.  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) COURIER SVC  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: 08 13 2014  
Amount of Each Disbursement this Period: 20.62  
Category/Type: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) ..... 134.84  
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) |                              |                              |                              |  |                              | PAGE 2 OF 2 |
|   | <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |             |

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NAME OF COMMITTEE (In Full)  
**MID CONTINENT POLITICAL ACTION COMMITTEE**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A T &amp; T MOBILITY</b>  |  | Date of Disbursement<br><b>08 13 2014</b>               |
| Mailing Address<br><b>P O BOX 536216</b>  |  | Amount of Each Disbursement this Period<br><b>93.52</b> |
| City<br><b>ATLANTA</b>  | State Zip Code<br><b>GA 30353-6216</b>   |   |
| Purpose of Disbursement<br><b>PHONE SVC.</b>  |  | Category/Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>PHONE SVC</b> |   |
| State: District:  |  |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A T &amp; T MOBILITY</b>  |   | Date of Disbursement<br><b>09 08 2014</b>               |
| Mailing Address<br><b>P O BOX 536216</b>  |   | Amount of Each Disbursement this Period<br><b>93.52</b> |
| City<br><b>ATLANTA</b>  | State Zip Code<br><b>GA 30353-6216</b>  |   |
| Purpose of Disbursement<br><b>PHONE SVC</b>   |   | Category/Type   |
| Candidate Name  |   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) <b>PHONE SVC.</b> |   |
| State: District:  |   |   |

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

**SUBTOTAL** of Disbursements This Page (optional) ..... **187.04**

**TOTAL** This Period (last page this line number only) ..... **321.88**

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

|  |  |
|--|--|
| <input checked="" type="checkbox"/> Hand Delivered                         | Date of Receipt<br>10/15/14  |
| <input type="checkbox"/> USPS First Class Mail                             | Postmarked   |
| <input type="checkbox"/> USPS Registered/Certified                         | Postmarked (R/C)   |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked   |
| <input type="checkbox"/> USPS Priority Mail Express                        | Postmarked   |
| <input type="checkbox"/> Postmark Illegible                                |  |
| <input type="checkbox"/> No Postmark                                       |  |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date<br>Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt  |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt  |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt  |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked  |

  
PREPARER  
(8/2013)

10/15/14  
DATE PREPARED