

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CORNYN MAJORITY COMMITTEE

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="9944.69"/>	<input type="text" value="9944.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="109632.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="179850.50"/>	<input type="text" value="1260062.21"/>
(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="289483.00"/>	<input type="text" value="1270006.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="215339.40"/>	<input type="text" value="1195863.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="74143.60"/>	<input type="text" value="74143.60"/>
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

Write or Type Committee Name

CORNYN MAJORITY COMMITTEE

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).....	173525.50	1216375.49
(ii) Unitemized	1325.00	7645.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	174850.50	1224020.49
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	36000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	179850.50	1260020.49
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	41.72
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	179850.50	1260062.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	179850.50	1260062.21

DETAILED SUMMARY PAGE

of Disbursements

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	17973.82	147763.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	17973.82	147763.04
22. Transfers to Affiliated/Other Party Committees.....	197365.58	1045500.26
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	2600.00
(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	2600.00
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)) ..	215339.40	1195863.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	215339.40	1195863.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	179850.50	1260020.49
34. Total Contribution Refunds (from Line 28(d))	0.00	2600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	179850.50	1257420.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17973.82	147763.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	41.72
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17973.82	147721.32

**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 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Neal Adams		Date of Receipt 10 / 09 / 2014 Transaction ID : SA11AI.10583
Mailing Address 3950 Hwy 360		Amount of Each Receipt this Period 1300.00
City Grapevine	State TX	Zip Code 76051
FEC ID number of contributing federal political committee. C	Name of Employer Adams Lynn & Loftin PC	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) B. Sonja Adams		Date of Receipt 10 / 09 / 2014 Transaction ID : SA11AI.10582
Mailing Address 3950 Hwy 360		Amount of Each Receipt this Period 1300.00
City Grapevine	State TX	Zip Code 76051
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Eric Affeldt		Date of Receipt 10 / 13 / 2014 Transaction ID : SA11AI.10635
Mailing Address 2020 LBJ Freeway, Ste 600		Amount of Each Receipt this Period 2600.00
City Dallas	State TX	Zip Code 75234
FEC ID number of contributing federal political committee. C	Name of Employer Club Corp	Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

SUBTOTAL of Receipts This Page (optional).....▶	5200.00
TOTAL This Period (last page this line number only).....▶	

**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 7 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Barry Andrews		Date of Receipt 10 / 15 / 2014 Transaction ID : SA11AI.10666
Mailing Address 2730 Irving Blvd		Amount of Each Receipt this Period 5000.00
City Dallas	State TX	Zip Code 75027
FEC ID number of contributing federal political committee. C	Name of Employer Andrews Distributions	Occupation President/CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10200.00	

Full Name (Last, First, Middle Initial) B. Cecil Atkisson		Date of Receipt 10 / 09 / 2014 Transaction ID : SA11AI.10629
Mailing Address 550 Benson Dr		Amount of Each Receipt this Period 2600.00
City Kerrville	State TX	Zip Code 78028
FEC ID number of contributing federal political committee. C	Name of Employer Self employed	Occupation Insurance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

Full Name (Last, First, Middle Initial) C. Todd Barth		Date of Receipt 10 / 01 / 2014 Transaction ID : SA11AI.10576
Mailing Address PO Box 56048		Amount of Each Receipt this Period 1000.00
City Houston	State TX	Zip Code 77526
FEC ID number of contributing federal political committee. C	Name of Employer Bowers Properties Inc.	Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8600.00
TOTAL This Period (last page this line number only).....▶	

**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 8 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Robert A. Behar
Full Name (Last, First, Middle Initial)

Mailing Address 5100 San Felipe #351E

City Houston	State TX	Zip Code 77056
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FEC ID number of contributing federal political committee. **C**

Name of Employer North Cypress Medical Center	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.10532

Amount of Each Receipt this Period
2500.00

B. Eric Bing
Full Name (Last, First, Middle Initial)

Mailing Address 306 Underwood Dr

City Houston	State TX	Zip Code 77024
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bing & Company	Occupation Business Consultant
------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2408.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.10749

Amount of Each Receipt this Period
408.50

In-kind - Catering

C. John H. Boswell
Full Name (Last, First, Middle Initial)

Mailing Address 1247 Ripple Creek Dr

City Houston	State TX	Zip Code 77057
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.10614

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	3158.50
TOTAL This Period (last page this line number only).....▶	

**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 9 OF 41
<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

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Henri L. Bromberg III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4942 Crooked Ln
 City State Zip Code
 Dalla TX 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 7600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2014
Transaction ID : SA11AI.10638
 Amount of Each Receipt this Period
 7600.00

B. James D. Caldwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 5732 Redwood
 City State Zip Code
 Dallas TX 75209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TRT Holdings President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11AI.10663
 Amount of Each Receipt this Period
 1000.00

C. Richard H. Collins
 Full Name (Last, First, Middle Initial)
 Mailing Address 8150 N. Central Expressway Ste. 1900
 City State Zip Code
 Dallas TX 75204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Today Newspaper Publisher
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11AI.10665
 Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....▶	11200.00
TOTAL This Period (last page this line number only).....▶	

**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 10 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Alanna Craig
Full Name (Last, First, Middle Initial)

Mailing Address 17539 Seidel Cementary Rd

City State Zip Code
Thomball TX 77377

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

Name of Employer Occupation
Self Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2014
Transaction ID : SA11AI.10567

Amount of Each Receipt this Period
2500.00

B. Mounang Desai
Full Name (Last, First, Middle Initial)

Mailing Address 6003 E Isla Vista

City State Zip Code
Houston TX 77041

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

Name of Employer Occupation
Self Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2014
Transaction ID : SA11AI.10565

Amount of Each Receipt this Period
2500.00

C. Malcolm Donnell
Full Name (Last, First, Middle Initial)

Mailing Address 2316 Timber Ln

City State Zip Code
Houston TX 77027

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

Name of Employer Occupation
Self employed Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 13 / 2014
Transaction ID : SA11AI.10650

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

**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 11 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Alain Elbaz		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 Transaction ID : SA11Al.10563
Mailing Address 5412 Pine St		Amount of Each Receipt this Period 2500.00
City Bellaire	State TX	Zip Code 77401
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Barbara Ellis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 Transaction ID : SA11Al.10658
Mailing Address 5 Champions Cir		Amount of Each Receipt this Period 500.00
City Amarillo	State TX	Zip Code 79124
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Donald Ellis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014 Transaction ID : SA11Al.10656
Mailing Address 5 Champions Cir		Amount of Each Receipt this Period 500.00
City Amarillo	State TX	Zip Code 79124
FEC ID number of contributing federal political committee. C		
Name of Employer First Bank Southwest	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

**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 12 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Ralph Ellis
Full Name (Last, First, Middle Initial)
Mailing Address 2805 S Hayden
City Amarillo State TX Zip Code 79109
FEC ID number of contributing federal political committee. **C**
Name of Employer Bevo Production Co. Occupation Oil Producer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 10 / 06 / 2014
Transaction ID : SA11AI.10604
Amount of Each Receipt this Period 2600.00

B. Charles R. Eskridge III
Full Name (Last, First, Middle Initial)
Mailing Address 3726 Nottingham Street
City Houston State TX Zip Code 77005
FEC ID number of contributing federal political committee. **C**
Name of Employer Susman Godfrey, LLP Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1408.50

Date of Receipt 10 / 01 / 2014
Transaction ID : SA11AI.10751
Amount of Each Receipt this Period 408.50
In-kind - Catering

C. Janis Finder
Full Name (Last, First, Middle Initial)
Mailing Address 4919 Williams Ct
City Houston State TX Zip Code 77081
FEC ID number of contributing federal political committee. **C**
Name of Employer Methodist Hospital Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2014
Transaction ID : SA11AI.10529
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3508.50
TOTAL This Period (last page this line number only)..... ▶

**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 13 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Stephanie Friemel
 Full Name (Last, First, Middle Initial)
 Mailing Address 2618 S Hughes
 City Amarillo State TX Zip Code 79109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lark Land and Cattle Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : SA11AI.10641
 Amount of Each Receipt this Period
 1000.00

B. Askok Grag
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 79748
 City Houston State TX Zip Code 77279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Allied Exports Inc Occupation Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA11AI.10610
 Amount of Each Receipt this Period
 500.00

C. James Graham
 Full Name (Last, First, Middle Initial)
 Mailing Address 4905 Radbrook PI
 City Dallas State TX Zip Code 75220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Palo Petroleum Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2014
Transaction ID : SA11AI.10639
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**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 14 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Jennifer Greger
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 Palmer Crest Ct
 City The Woodlands State TX Zip Code 77381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **10 / 02 / 2014**
Transaction ID : SA11AI.10561
 Amount of Each Receipt this Period **2500.00**

B. Clark Hunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 Elm St, Ste 4000
 City Dallas State TX Zip Code 75201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer H W Partners Occupation Investment Advisors
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2600.00**

Date of Receipt **10 / 03 / 2014**
Transaction ID : SA11AI.10590
 Amount of Each Receipt this Period **2600.00**

C. Jane F. Juett
 Full Name (Last, First, Middle Initial)
 Mailing Address 2400 W 26th Ave
 City Amarillo State TX Zip Code 79109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 14 / 2014**
Transaction ID : SA11AI.10643
 Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional).....	6100.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 41
(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
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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)
CORNYN MAJORITY COMMITTEE

A. Kim Keller
Full Name (Last, First, Middle Initial)
Mailing Address 1406 Champions Hamlet Cir
City The Woodlands State TX Zip Code 77069
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 02 / 2014
Transaction ID : SA11AI.10559
Amount of Each Receipt this Period 2500.00

B. John Krister
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 31388
City Amarillo State TX Zip Code 79120
FEC ID number of contributing federal political committee. **C**
Name of Employer Yellowhouse Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 14 / 2014
Transaction ID : SA11AI.10675
Amount of Each Receipt this Period 1000.00

C. Peggy Kruckemeyer
Full Name (Last, First, Middle Initial)
Mailing Address 16402 Agusta Ct
City Spring State TX Zip Code 77379
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2014
Transaction ID : SA11AI.10608
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00
TOTAL This Period (last page this line number only)..... ▶

**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 16 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Robert Kruckemeyer
Full Name (Last, First, Middle Initial)

Mailing Address 16402 Agusta Ct

City Spring State TX Zip Code 77379

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.10606

Amount of Each Receipt this Period
250.00

B. John Ford Lacy
Full Name (Last, First, Middle Initial)

Mailing Address 3710 Shenandoah

City Dallas State TX Zip Code 75205

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.10620

Amount of Each Receipt this Period
1000.00

C. Steven C. Laird
Full Name (Last, First, Middle Initial)

Mailing Address 7979 Chartwell Ln

City Fort Worth State TX Zip Code 76120

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

Name of Employer Law Office of Steven C. Laird Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.10660

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 41
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Jimmy Lee
Full Name (Last, First, Middle Initial)
Mailing Address 23 Thornblade Cir
City The Woodlands State TX Zip Code 77289
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
10 / 02 / 2014
Transaction ID : SA11AI.10557
Amount of Each Receipt this Period
2500.00

B. Milam Mabry
Full Name (Last, First, Middle Initial)
Mailing Address 4432 Crestway Drive
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer Bracewell & Giuliani, LLP Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
10 / 01 / 2014
Transaction ID : SA11AI.10571
Amount of Each Receipt this Period
1000.00

C. Steven Mach
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 130630
City Houston State TX Zip Code 77217
FEC ID number of contributing federal political committee. **C**
Name of Employer Mach Industries Occupation VP Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
10 / 01 / 2014
Transaction ID : SA11AI.10569
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

**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 18 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)
A. Steven Mach

Mailing Address PO Box 130630

City Houston State TX Zip Code 77217

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

Name of Employer Mach Industries Occupation VP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1408.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11Al.10753

Amount of Each Receipt this Period
408.50

In-kind - Catering

Full Name (Last, First, Middle Initial)
B. Stevens Mafrige

Mailing Address 11540 Green Oaks

City Houston State TX Zip Code 77024

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11Al.10594

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. E. Martin Markl

Mailing Address 301 Commerce st, No 2260

City Ft. Worth State TX Zip Code 76102

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

Name of Employer Energy Financing Inc. Occupation Businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2014

Transaction ID : SA11Al.10618

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2408.50
TOTAL This Period (last page this line number only).....▶	

**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 19 OF 41
<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

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Gary Martin		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2014 Transaction ID : SA11AI.10602
Mailing Address PO Box 1990		Amount of Each Receipt this Period 50000.00
City Marble Falls	State TX	Zip Code 78654
FEC ID number of contributing federal political committee. C		
Name of Employer RJ Machinery	Occupation Owner	
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. George L. McWilliams		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2014 Transaction ID : SA11AI.10531
Mailing Address 3535 Gillespie St		Amount of Each Receipt this Period 1000.00
City Dallas	State TX	Zip Code 75219
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. Mark Mettauer		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 Transaction ID : SA11AI.10555
Mailing Address 14 N Seasons Trace		Amount of Each Receipt this Period 2500.00
City The Woodlands	State TX	Zip Code 77382
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	53500.00
TOTAL This Period (last page this line number only).....▶	

**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 20 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Warren Morgan
Full Name (Last, First, Middle Initial)

Mailing Address 531 Three Corners Dr

City Houston State TX Zip Code 77024

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 02 / 2014
Transaction ID : SA11Al.10553

Amount of Each Receipt this Period 2500.00

B. Dean Morrison
Full Name (Last, First, Middle Initial)

Mailing Address 2609 S. Hughes St

City Amarillo State TX Zip Code 79109

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

Name of Employer Budweiser Dist. Co Occupation Beer Wholesaler

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 10 / 09 / 2014
Transaction ID : SA11Al.10572

Amount of Each Receipt this Period 2600.00

C. Sherry Morrison
Full Name (Last, First, Middle Initial)

Mailing Address 2609 S Hughes St

City Amarillo State TX Zip Code 79109

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

Name of Employer None Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 10 / 09 / 2014
Transaction ID : SA11Al.10574

Amount of Each Receipt this Period 2600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 41
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Scott Olsson
Full Name (Last, First, Middle Initial)

Mailing Address 827 Kuhlman Rd

City Houston State TX Zip Code 77024

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11Al.10551

Amount of Each Receipt this Period
 2500.00

B. Barbara S. Patton
Full Name (Last, First, Middle Initial)

Mailing Address 28 West Oak Drive N

City Houston State TX Zip Code 77056

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

Name of Employer None Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014
Transaction ID : SA11Al.10619

Amount of Each Receipt this Period
 500.00

C. Bernard Paulson
Full Name (Last, First, Middle Initial)

Mailing Address 8580 Woodway Dr, Apt 1108

City Houston State TX Zip Code 77063

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2014
Transaction ID : SA11Al.10612

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	

**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 22 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael Popejoy			Date of Receipt
Mailing Address 3401 Harvard Ave			<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.10661
Dallas	TX	75205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation		
TRT Holding	VP Energy		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dileep Puppala			Date of Receipt
Mailing Address 419 Pine Needle Dr			<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.10549
Houston	TX	77024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2500.00"/>
Name of Employer	Occupation		
Self	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Scott Rivenes			Date of Receipt
Mailing Address 3911 Oakmont Ct			<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.10588
Sugar Land	TX	77479	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2500.00"/>
Name of Employer	Occupation		
Self employed	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 23 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Robert Sheppard
Full Name (Last, First, Middle Initial)

Mailing Address 12319 Drake Prairie Ln

City Cypress State TX Zip Code 77429

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11AI.10547

Amount of Each Receipt this Period
 2500.00

B. Kumran Sherwani
Full Name (Last, First, Middle Initial)

Mailing Address 62 Lake Sterling Gate Dr

City Spring State TX Zip Code 77379

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : SA11AI.10545

Amount of Each Receipt this Period
 2500.00

C. Cece F. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 3710 Shenandoah

City Dallas State TX Zip Code 75205

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014
Transaction ID : SA11AI.10621

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

**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 24 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. Roger Staucack
Full Name (Last, First, Middle Initial)

Mailing Address 8343 Douglas Ave, Ste 100

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer Jones Lang LaSalle	Occupation Chairman
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2014

Transaction ID : SA11AI.10625

Amount of Each Receipt this Period
2000.00

B. Ronald Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 715 Nottingham St

City Houston	State TX	Zip Code 77005
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Transaction ID : SA11AI.10598

Amount of Each Receipt this Period
2500.00

C. James Toung
Full Name (Last, First, Middle Initial)

Mailing Address 12118 Indigo Cv Ln

City Houston	State TX	Zip Code 77041
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

Transaction ID : SA11AI.10543

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

**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 25 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Carolyn Townsend		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014
Mailing Address 4551 Arcady Ave		Transaction ID : SA11AI.10637
City Dallas	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Barbara Upham		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 83		Transaction ID : SA11AI.10616
City Mineral Wells	State TX	Zip Code 76068
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200.00	
Name of Employer Self employed	Occupation Rancher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5200.00	

Full Name (Last, First, Middle Initial) C. Srinivasa R. Venkatsh		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014
Mailing Address 618 Piney Point Rd		Transaction ID : SA11AI.10541
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	8700.00
TOTAL This Period (last page this line number only).....▶	

**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 26 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Srinivas Vodnala		Date of Receipt
Mailing Address 11811 Sunset Lake Court		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Houston	TX	77068
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10539
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bradley Waggoner		Date of Receipt
Mailing Address 17210 Saddle Ridge Pass		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cypress	TX	77269
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10537
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Ware		Date of Receipt
Mailing Address PO Box 1		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Amarillo	TX	79501
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10649
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1600.00"/>
Name of Employer	Occupation	
Amarillo National Bank	Banker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 27 OF 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)
A. William Weaver

Mailing Address 1845 Woodall Rodgers Freeway

City State Zip Code
Dallas TX 75201

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

Name of Employer Occupation
none retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014
Transaction ID : SA11AI.10623

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Steven Webster

Mailing Address 500 Dallas St, Ste 2300

City State Zip Code
Houston TX 77002

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

Name of Employer Occupation
Avista Capital Co-CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2014
Transaction ID : SA11AI.10627

Amount of Each Receipt this Period
2600.00

Full Name (Last, First, Middle Initial)
C. Vicki Weinberg

Mailing Address 5603 Normandy Dr

City State Zip Code
Colleyville TX 76034

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

Name of Employer Occupation
Self-employed Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11AI.10677

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 41
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Jerome S. Wilkenfeld		Date of Receipt
Mailing Address P.O. Box 55008		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Houston	TX	77255
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10536
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Self-employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Don Willis		Date of Receipt
Mailing Address 5949 Sherry Ln		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Dallas	TX	75225
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10584
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Self employed	Investments	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sue Willis		Date of Receipt
Mailing Address 5949 Sherry Ln		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
Dallas	TX	75225
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10586
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
None	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 29 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Patricia Yetter		Date of Receipt										
Mailing Address 7510 Noah Ln		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		01		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
10		01		2014								
City Spring	State TX	Zip Code 77379										
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.10592										
Name of Employer None		Amount of Each Receipt this Period										
Occupation Homemaker		1000.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		1000.00										

Full Name (Last, First, Middle Initial) B. Noe Zamora		Date of Receipt										
Mailing Address 930 Lamonte Ln		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>02</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		02		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
10		02		2014								
City Houston	State TX	Zip Code 77018										
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.10534										
Name of Employer Self		Amount of Each Receipt this Period										
Occupation Physician		2500.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		2500.00										

Full Name (Last, First, Middle Initial) C.		Date of Receipt										
Mailing Address		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y								
City	State	Zip Code										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer												
Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	173525.50

**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 30 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

A. AGL RESOURCES INC. POLITICAL ACTION COMMITTEE, INC. (AGL PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 4569
 LOCATION 1519
 City ATLANTA State GA Zip Code 30302
 FEC ID number of contributing federal political committee. **C** C00145037
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2014
Transaction ID : SA11C.10600
 Amount of Each Receipt this Period
 3000.00

B. BRACEPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 K STREET, NW
 SUITE 500
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00021295
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2014
Transaction ID : SA11C.10653
 Amount of Each Receipt this Period
 1000.00

C. UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 15305 DALLAS PARKWAY, SUITE 1600
 City ADDISON State TX Zip Code 75001
 FEC ID number of contributing federal political committee. **C** C00402073
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2014
Transaction ID : SA11C.10679
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. American Express-Merchant

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Service Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB21B.10684

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. American Express-Merchant

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Service Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10685

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. American Express-Merchant

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Service Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : SB21B.10686

Amount of Each Disbursement this Period

292.94

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

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

308.84

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Aristeia Group, Inc.

Mailing Address 1203 Partner Rd

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : SB21B.10683

Amount of Each Disbursement this Period

787.98

Full Name (Last, First, Middle Initial)

B. Orbitz

Mailing Address 500 W Madison St,

City Chicago State IL Zip Code 60661

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2014

Transaction ID : SB21B.10683.0

Amount of Each Disbursement this Period

494.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. BB&T

Mailing Address 1909 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Merchant Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : SB21B.10687

Amount of Each Disbursement this Period

347.92

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

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

1135.90

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Eric Bing

Mailing Address 306 Underwood Dr

City Houston State TX Zip Code 77024

Purpose of Disbursement
In-kind - Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB21B.10750

Amount of Each Disbursement this Period

408.50

Full Name (Last, First, Middle Initial)

B. Citi Gold Advantage Card

Mailing Address PO Box 6010

City Sioux Falls State SD Zip Code 57117

Purpose of Disbursement
Credit Card: Travel and Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : SB21B.10688

Amount of Each Disbursement this Period

871.97

Full Name (Last, First, Middle Initial)

C. Best Western Hondo Inn

Mailing Address 301 Hwy 90 E

City Hondo State TX Zip Code 78661

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : SB21B.10688.10

Amount of Each Disbursement this Period

119.00

[MEMO ITEM]

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

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

1280.47

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Best Western Hondo Inn

Mailing Address 301 Hwy 90 E

City Hondo State TX Zip Code 78661

Purpose of Disbursement
lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : SB21B.10688.11

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Best Western Hondo Inn

Mailing Address 301 Hwy 90 E

City Hondo State TX Zip Code 78661

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : SB21B.10688.12

Amount of Each Disbursement this Period

238.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Charles R. Eskridge III

Mailing Address 3726 Nottingham Street

City Houston State TX Zip Code 77005

Purpose of Disbursement
In-kind - Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB21B.10752

Amount of Each Disbursement this Period

408.50

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

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

408.50

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) A. Amanda M. Gravitt		Date of Disbursement MM / DD / YYYY 10 / 15 / 2014
Mailing Address 323 Rawhide Loop		Transaction ID : SB21B.10689
City Round Rock	State TX	
Zip Code 78681	Purpose of Disbursement Reimbursed office supplies name badges and envelopes	Amount of Each Disbursement this Period 35.70
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. OfficeMax		Date of Disbursement MM / DD / YYYY 09 / 20 / 2014
Mailing Address 907 W 5th St		Transaction ID : SB21B.10689.0
City Austin	State TX	
Zip Code 78703	Purpose of Disbursement name badges and stickers	Amount of Each Disbursement this Period 35.70
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Steven Mach		Date of Disbursement MM / DD / YYYY 10 / 01 / 2014
Mailing Address PO Box 130630		Transaction ID : SB21B.10754
City Houston	State TX	
Zip Code 77217	Purpose of Disbursement In-kind - Catering	Amount of Each Disbursement this Period 408.50
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	444.20
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

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NAME OF COMMITTEE (In Full)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Maianne Sahl

Mailing Address 16714 Fitzhugh Road

City Dripping Springs State TX Zip Code 78620

Purpose of Disbursement
See below: Travel and Event Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SB21B.10690

Amount of Each Disbursement this Period

4165.91

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SB21B.10690.5

Amount of Each Disbursement this Period

464.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

Transaction ID : SB21B.10690.6

Amount of Each Disbursement this Period

230.60

[MEMO ITEM]

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

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

4165.91

**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Merche Restaurant

Mailing Address 21208 Northwewst Frwy

City State Zip Code
Cypress TX 77429

Purpose of Disbursement
Catering Food and Beverage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2014			

Transaction ID : SB21B.10690.12

Amount of Each Disbursement this Period

247.94

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Avis Rental

Mailing Address 1610 West 35th St

City State Zip Code
Austin TX 78703

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

Transaction ID : SB21B.10690.15

Amount of Each Disbursement this Period

115.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Houstonian Hotel

Mailing Address 111 N Post

City State Zip Code
Houston TX 77024

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2014			

Transaction ID : SB21B.10690.16

Amount of Each Disbursement this Period

231.79

[MEMO ITEM]

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

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

0.00

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**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City State Zip Code
Dallas TX 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : SB21B.10690.17

Amount of Each Disbursement this Period

232.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address PO Box 36647

City State Zip Code
Dallas TX 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2014			

Transaction ID : SB21B.10690.18

Amount of Each Disbursement this Period

234.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647

City State Zip Code
Dallas TX 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			2014			

Transaction ID : SB21B.10690.19

Amount of Each Disbursement this Period

466.20

[MEMO ITEM]

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

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

0.00

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**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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	4

Transaction ID : SB21B.10690.20

Amount of Each Disbursement this Period

6	1	5	.	2	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. III Forks

Mailing Address 111 Lavaca St

City Austin State TX Zip Code 78701

Purpose of Disbursement
Catering Food and Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	1	4

Transaction ID : SB21B.10690.21

Amount of Each Disbursement this Period

7	5	8	.	0	9
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. The Sahl Group

Mailing Address 16714 Fitzhugh Road

City Dripping Springs State TX Zip Code 78620

Purpose of Disbursement
Fundraising Consulting Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

Transaction ID : SB21B.10682

Amount of Each Disbursement this Period

1	0	2	3	.	0	0
---	---	---	---	---	---	---

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

1	0	2	3	.	0	0
---	---	---	---	---	---	---

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

1	7	9	7	.	8	2
---	---	---	---	---	---	---

**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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALAMO PAC

Mailing Address 919 CONGRESS AVE SUITE 1400

City State Zip Code
AUSTIN TX 78701

Purpose of Disbursement
Transfer of net proceeds

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SB22.10757

Amount of Each Disbursement this Period

8445.98

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City State Zip Code
WASHINGTON DC 20002

Purpose of Disbursement
Transfer of net proceeds

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : SB22.10759

Amount of Each Disbursement this Period

21712.06

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF TEXAS

Mailing Address 1108 LAVACA STREET, SUITE 500

City State Zip Code
AUSTIN TX 78701

Purpose of Disbursement
Transfer of net proceeds

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2014

Transaction ID : SB22.10758

Amount of Each Disbursement this Period

75000.00

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

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

105158.04

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)
CORNYN MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial)

A. TEXANS FOR SENATOR JOHN CORNYN INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Mailing Address 6850 AUSTIN CENTRE BLVD
SUITE 180

Transaction ID : SB22.10756

City AUSTIN State TX Zip Code 78731

Amount of Each Disbursement this Period

92207.54

Purpose of Disbursement
Transfer of net Proceeds

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

92207.54

197365.58
