

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC

14 OCT 30 AM 11:55

October 23, 2014

Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington, DC 20510-7116

To Whom It May Concern:

Enclosed herewith is the Report of Receipts and Disbursements for an Authorized Committee, FEC Form 3, covering the period from 10/1/2014 through 10/15/2014. This is the Committee's Pre-Election Report for the General. This report is submitted by the Charlie Hardy for Senate campaign committee, FEC Identification Number C00554758.

Sincerely,



David Finley

Treasurer

Charlie Hardy for Senate

Encl.

RECEIVED  
SECRETARY OF THE SENATE  
PUB:

14 OCT 30 AM 11:55

**FEC  
FORM 3**

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

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CHARLIE HARDY FOR SENATE

ADDRESS (number and street)

1901 CENTRAL AVE #A

Check if different than previously reported. (ACC)

CHEYENNE

WY

82001

2. FEC IDENTIFICATION NUMBER ▼

C 00 55 4758

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

WY

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11 ' 04 ' 2014

in the State of

WY

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M D

in the State of

5. Covering Period

10 ' 01 ' 2014

through

10 ' 15 ' 2014

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

Type or Print Name of Treasurer

DAVID FINLEY

Signature of Treasurer

David Finley

Date

10 ' 23 ' 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 3**  
(Revised 02/2003)

**SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

**CHARLIE HARDY FOR SENATE**

Report Covering the Period: From: **10 01 2014** To: **10 15 2014**

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))...	1,803.04	43,208.68
(b) Total Contribution Refunds (from Line 20(d))...	0.00	, 983.60
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	1,803.04	42,225.08
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	3,722.78	, 67,399.56
(b) Total Offsets to Operating Expenditures (from Line 14)...	, 0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	3,722.78	67,399.56
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	<b>4,034.93</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	<b>56,939.80</b>	

For further information contact:

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

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

14021212441

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

**CHARLIE HARDY FOR SENATE**

Report Covering the Period: From: **10 01 2014** To: **10 15 2014**

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	593.57	18,941.64
(ii) Unitemized.....	1,209.47	24,266.92
(iii) TOTAL of contributions from Individuals . ▶	1,803.04	43,208.56
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1,803.04	43,208.56
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate...	0.00	29,201.41
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	29,201.41
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b> ▶	1,803.04	72,417.97

14021212442

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	37 22 78	67.399 56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	000	0 00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	000	0.00
(b) Of All Other Loans .....	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	000	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	000	983 60
(b) Political Party Committees...	000	000
(c) Other Political Committees (such as PACs)...	000	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	000	983 60
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	37 22 78	68.383.16

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	5.954 67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1803.04
25. SUBTOTAL (add Line 23 and Line 24)...	775771
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	37 22 78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	403493

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 30	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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)  
**CHALLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. HANDEN, STEPHEN</b>		Date of Receipt <b>10 04 2014</b>
Mailing Address <b>420 MESA RD</b>		Amount of Each Receipt this Period <b>, 100.00</b>
City <b>COLORADO SPRINGS</b>	State <b>CO</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 250.00</b>
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. HUTT, DOROTHY</b>		Date of Receipt <b>10 04 2014</b>
Mailing Address <b>1515 W. 28th St. #201</b>		Amount of Each Receipt this Period <b>, 100.00</b>
City <b>LOVELAND</b>	State <b>CO</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 300.00</b>
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. MARUJO, CAROL (US CITIZEN)</b>		Date of Receipt <b>10 11 2014</b>
Mailing Address <b>PO Box 23-6000</b>		Amount of Each Receipt this Period <b>, 300.00</b>
City <b>SANTIAGO de PURISCAL, COSTA RICA</b>	State <b>CO</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 300.00</b>
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

14021212444

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 30	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>WILKINSON, BRUCE</b>		Date of Receipt M M D D Y Y Y Y <b>10 01 2014</b>
Mailing Address <b>816 ADAMS ST. SE</b>		Amount of Each Receipt this Period <b>93.57</b>
City <b>OLYMPIA</b>	State <b>WA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		<b>VALUE OF RV LOANED TO CAMPAIGN BEGINNING 7/1/14; PRORATED FOR 10/1/14-10/15/14</b>
Name of Employer <b>CHARLIE HARDY FOR SENATE</b>	Occupation <b>CAMPAIGN MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>, 654.96</b>	

Full Name (Last, First, Middle Initial)		Date of Receipt M M
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		, ,
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,	

Full Name (Last, First, Middle Initial)		Date of Receipt M M
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		, ,
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	, , <b>93.57</b>
<b>TOTAL</b> This Period (last page this line number only).....	, , <b>593.57</b>

14021212445

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. CITI CARDS</b>		Date of Disbursement <b>10 07 2014</b>	
Mailing Address <b>Box 6500</b>		Amount of Each Disbursement this Period <b>1,000.00</b>	
City <b>SIoux FALLS SD</b>	State <b>SD</b>		Zip Code <b>57117</b>
Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement <b>10 02 2014</b>	
Mailing Address		Amount of Each Disbursement this Period <b>12.71</b> <b>MEMO - CITICARD CREDIT CARD PAYMENT DATED 10/07/2014.</b>	
City	State		Zip Code
Purpose of Disbursement <b>OFFICE SUPPLIES</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement <b>10 06 2014</b>	
Mailing Address		Amount of Each Disbursement this Period <b>37.00</b> <b>MEMO - CITICARD CREDIT CARD PAYMENT DATED 10/07/2014.</b>	
City	State		Zip Code
Purpose of Disbursement <b>POSTAGE</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

SUBTOTAL of Disbursements This Page (optional).....	<b>1,000.00</b>
TOTAL This Period (last page this line number only).....	

14021212446



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <b>8</b> OF <b>30</b>			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. GASAMAT</b>		Date of Disbursement <b>10 07 2014</b>	
Mailing Address		Amount of Each Disbursement this Period <b>40.21</b> <b>MEMO - CITICARD CREDIT CARD PAYMENT DATED 10/07/2014.</b>	
City	State		Zip Code
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>B. OFFICE DEPOT</b>		Date of Disbursement <b>10 07 2014</b>	
Mailing Address		Amount of Each Disbursement this Period <b>59.36</b> <b>MEMO - CITICARD CREDIT CARD PAYMENT DATED 10/07/2014.</b>	
City	State		Zip Code
Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>C. US PS</b>		Date of Disbursement <b>10 07 2014</b>	
Mailing Address		Amount of Each Disbursement this Period <b>268.52</b> <b>MEMO - CITICARD CREDIT CARD PAYMENT DATED 10/07/2014.</b>	
City	State		Zip Code
Purpose of Disbursement <b>POSTAGE</b>	Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

14021212447

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. MODEL SIGNS</b>		Date of Disbursement <b>10 07 2014</b>
Mailing Address		Amount of Each Disbursement this Period <b>800.00</b> <b>MEMO-CITICARD CREDIT</b> <b>CARD PAYMENT DATED</b> <b>10/07/2014.</b>
City	State Zip Code	
Purpose of Disbursement <b>YARD SIGNS</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. MODEL SIGNS</b>		Date of Disbursement <b>10 08 2014</b>
Mailing Address		Amount of Each Disbursement this Period <b>640.54</b> <b>MEMO-CITICARD CREDIT</b> <b>CARD PAYMENT DATED</b> <b>10/07/2014.</b>
City	State Zip Code	
Purpose of Disbursement <b>YARD SIGNS</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement <b>M M</b>
Mailing Address		Amount of Each Disbursement this Period <b>, ,</b>
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
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).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

14021212448

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement <b>10 / 06 / 2014</b>
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>420.00</b>
City <b>FT. LAUDERDALE FL</b>	State <b>FL</b>	
Zip Code <b>33329-7812</b>		
Purpose of Disbursement <b>CREDIT CARD PAYMENT</b>	Candidate Name <b>CHARLIE HARDY</b>	Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. GASAMAT</b>		Date of Disbursement <b>08 / 28 / 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>20.36</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C. GASAMAT</b>		Date of Disbursement <b>08 / 23 / 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>48.88</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....	<b>420.00</b>
TOTAL This Period (last page this line number only).....	

14021212449

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 11 OF 30
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. GASAMAT</b>		Date of Disbursement <b>08 25 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>75.00</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. GASAMAT</b>		Date of Disbursement <b>08 25 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>54.94</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C. GASAMAT</b>		Date of Disbursement <b>08 25 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>75.00</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

14021212450

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE <u>18</u> OF <u>30</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement <b>08 27 2014</b>	
Mailing Address <b>2120 CAPITOL AVE.</b>		Amount of Each Disbursement this Period <b>58.80</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>POSTAGE</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement <b>08 29 2014</b>	
Mailing Address <b>2120 CAPITOL AVE.</b>		Amount of Each Disbursement this Period <b>98.00</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>POSTAGE</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>C. GASAMAT</b>		Date of Disbursement <b>08 30 2014</b>	
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>31.15</b> <b>MEMO - AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

SUBTOTAL of Disbursements This Page (optional).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

14021212451

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 OF 30
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. WYOMING TROPHY &amp; ENGRAVING</b>		Date of Disbursement <b>09 06 2014</b>
Mailing Address <b>1620 THOMES AVE.</b>		Amount of Each Disbursement this Period <b>10.60</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		<b>MEMO-AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
Purpose of Disbursement <b>PROMOTIONAL MATERIALS</b>		
Candidate Name <b>PRO CHARLIE HARDY</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>B. AMEX</b>		Date of Disbursement <b>09 22 2014</b>
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>232.66</b>
City <b>FT. LAUDERDALE FL</b>	State <b>FL</b>	
Zip Code <b>33329-7812</b>		<b>MEMO-AMEX CREDIT CARD PAYMENT DATED 10/06/2014.</b>
Purpose of Disbursement <b>INTEREST ON CREDIT CARD BAL.</b>		
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
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)..... **0.00**

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

14021212452

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 30

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20a     18  
20b     18a  
20c     18b  
21

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NAME OF COMMITTEE (in Full)

**CHARLIE HARDY FOR SENATE**

<p><b>A. FACE BOOK</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address <b>HACKER WAY</b></p> <p>City <b>MENLO PARK</b> CA State Zip Code <b>94025</b></p> <p>Purpose of Disbursement <b>ADVERTISING</b></p> <p>Candidate Name <b>CHARLIE HARDY</b></p> <p>Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/></p> <p>Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/></p> <p>State: <b>WY</b> District: <input type="checkbox"/></p>	<p>Date of Disbursement <b>10 01 2014</b></p> <p>Amount of Each Disbursement this Period <b>108.01</b></p>
<p><b>B. VALLEY MART</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address <b>3800 US 191</b></p> <p>City <b>FARSON</b> WY State Zip Code <b>82932</b></p> <p>Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b></p> <p>Candidate Name <b>CHARLIE HARDY</b></p> <p>Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/></p> <p>Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/></p> <p>State: <b>WY</b> District: <input type="checkbox"/></p>	<p>Date of Disbursement <b>10 02 2014</b></p> <p>Amount of Each Disbursement this Period <b>125.00</b></p>
<p><b>C. PILOT</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address <b>650 STAGECOACH DR.</b></p> <p>City <b>ROCK SPRINGS</b> WY State Zip Code <b>82901</b></p> <p>Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b></p> <p>Candidate Name <b>CHARLIE HARDY</b></p> <p>Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/></p> <p>Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/></p> <p>State: <b>WY</b> District: <input type="checkbox"/></p>	<p>Date of Disbursement <b>10 03 2014</b></p> <p>Amount of Each Disbursement this Period <b>9.74</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional)..... <b>242.75</b></p> <p><b>TOTAL</b> This Period (last page this line number only).....</p>	

14021212453

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 15 OF 30
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. PILOT</b>		Date of Disbursement <b>10 03 2014</b>
Mailing Address <b>650 STAGECOACH DR.</b>		Amount of Each Disbursement this Period <b>124.13</b>
City <b>ROCK SPRINGS WY</b>	State <b>WY</b>	
Zip Code <b>82901</b>		
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>		
Candidate Name <b>CHARLIE HARDY</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. EXKOMOBIL</b>		Date of Disbursement <b>10 06 2014</b>
Mailing Address <b>2029 DELL RANGE BLVD.</b>		Amount of Each Disbursement this Period <b>12.79</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82009</b>		
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>		
Candidate Name <b>CHARLIE HARDY</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C. PILOT</b>		Date of Disbursement <b>10 03 2014</b>
Mailing Address <b>650 STAGECOACH DR.</b>		Amount of Each Disbursement this Period <b>10.73</b>
City <b>ROCK SPRINGS WY</b>	State <b>WY</b>	
Zip Code <b>82901</b>		
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>		
Candidate Name <b>CHARLIE HARDY</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....	<b>147.65</b>
TOTAL This Period (last page this line number only).....	

14021212454



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 30

17  
20a     18  
20b     19a  
20c     19b  
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NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

<p>Full Name (Last, First, Middle Initial)</p> <p><b>A. BRASHEAR, NICK</b></p>		<p>Date of Disbursement</p> <p><b>10 07 2014</b></p>
<p>Mailing Address</p> <p><b>1901 CENTRAL AVE #503</b></p>		<p>Amount of Each Disbursement this Period</p> <p><b>400.00</b></p>
<p>City</p> <p><b>CHEYENNE WY</b> State <b>82001</b> Zip Code</p>	<p>Purpose of Disbursement</p> <p><b>VOLUNTEER ORGANIZING</b></p>	
<p>Candidate Name</p> <p><b>CHARLIE HARDY</b></p>	<p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p><b>400.00</b></p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>WY</b> District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	
<p>Full Name (Last, First, Middle Initial)</p> <p><b>B. AGLULGD, FELIX</b></p>		<p>Date of Disbursement</p> <p><b>10 07 2014</b></p>
<p>Mailing Address</p> <p><b>1326 MIRADA DRIVE NW</b></p>		<p>Amount of Each Disbursement this Period</p> <p><b>400.00</b></p>
<p>City</p> <p><b>OLYMPIA WA</b> State <b>98502</b> Zip Code</p>	<p>Purpose of Disbursement</p> <p><b>VOLUNTEER ORGANIZING</b></p>	
<p>Candidate Name</p> <p><b>CHARLIE HARDY</b></p>	<p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p><b>157.66</b></p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>WY</b> District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	
<p>Full Name (Last, First, Middle Initial)</p> <p><b>C. EXXONMOBIL</b></p>		<p>Date of Disbursement</p> <p><b>10 14 2014</b></p>
<p>Mailing Address</p> <p><b>2029 DELL RANGE BLVD.</b></p>		<p>Amount of Each Disbursement this Period</p> <p><b>157.66</b></p>
<p>City</p> <p><b>CHEYENNE WY</b> State <b>82009</b> Zip Code</p>	<p>Purpose of Disbursement</p> <p><b>FUEL FOR CAMPAIGN VEHICLE</b></p>	
<p>Candidate Name</p> <p><b>CHARLIE HARDY</b></p>	<p>Category/Type</p>	<p>Amount of Each Disbursement this Period</p> <p><b>957.66</b></p>
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: <b>WY</b> District:</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	

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

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

14021212455

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE <u>17</u> OF <u>30</u>
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. BATTERIES PLUS</b>		Date of Disbursement <b>10 14 2014</b>
Mailing Address <b>5116 FRONTIER MALL DR.</b>		Amount of Each Disbursement this Period <b>213.06</b>
City <b>CHEYENNE</b> State <b>WY</b> Zip Code <b>82009</b>	Purpose of Disbursement <b>BATTERY FOR CAMPAIGN VEHICLE</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>B. WILKINSON, BRUCE</b>		Date of Disbursement <b>10 01 2014</b>
Mailing Address <b>816 ADAMS ST. SE</b>		Amount of Each Disbursement this Period <b>93.57</b>
City <b>OLYMPIA</b> State <b>WA</b> Zip Code <b>98501</b>	Purpose of Disbursement <b>CAMPAIGN VEHICLE LOANED VALUE</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type	<b>(N-KIND)</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
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) ..... **306.63**  
 TOTAL This Period (last page this line number only) ..... **3,074.69**

14021212456

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 18 OF 30

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial) <b>HARDY, CHARLES E. - PERSONAL FUNDS</b>	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address <b>PO BOX 1951</b>	

City <b>CHEYENNE</b>	State <b>WY</b>	ZIP Code <b>82003-1951</b>
-------------------------	--------------------	-------------------------------

Original Amount of Loan <b>80941</b>	Cumulative Payment To Date <b>000</b>	Balance Outstanding at Close of This Period <b>80941</b>
---	--	---

TERMS <b>VARIOUS</b>	Date Incurred	Date Due <b>NO DUE DATE</b>	Interest Rate <b>0.00</b> % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
-------------------------	---------------	--------------------------------	--------------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

**TOTALS** This Period (last page in this line only) ... ▶

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

14021212457

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary

General

Other (specify) ▼

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**4500 00**

Cumulative Payment To Date

**0.00**

Balance Outstanding at Close of This Period

**4500.00**

TERMS

Date Incurred

**02 05 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed  
Outstanding:

**4500 00**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

2. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Name of Employer

Occupation

Amount

Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Name of Employer

Occupation

Amount

Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

ZIP Code

Name of Employer

Occupation

Amount

Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only) .. .. . ▶

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

14021212458

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary

General

Other (specify) ▾

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**9500.00**

Cumulative Payment To Date

**0.00**

Balance Outstanding at Close of This Period

**9500.00**

TERMS

Date Incurred

**02 14 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed  
Outstanding:

**9500.00**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount  
Guaranteed  
Outstanding:

City

State

ZIP Code

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount  
Guaranteed  
Outstanding:

City

State

ZIP Code

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount  
Guaranteed  
Outstanding:

City

State

ZIP Code

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

**TOTALS** This Period (last page in this line only) ... .. ▶

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

14021212459

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary

General

Other (specify) ▼

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**250 00**

Cumulative Payment To Date

**0 00**

Balance Outstanding at Close of This Period

**250 00**

**TERMS**

Date Incurred

**04 04 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0 00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

Amount Guaranteed Outstanding:

**250 00**

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only) ... .. ▶

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

14021212460

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E - CREDIT CARD ADVANCE**

Election:  
 Primary  
General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>3500.00</b>	<b>0.00</b>	<b>3500.00</b>

TERMS Date Incurred Date Due Interest Rate Secured:  
**04 16 2014 NO DUE DATE 0.00 % (apr) Yes  No**

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALES, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>3500.00</b>

2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

**TOTALS** This Period (last page in this line only) ... .. ▶

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

14021212461

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary

General

Other (specify) ▾

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**1500.00**

Cumulative Payment To Date

**0.00**

Balance Outstanding at Close of This Period

**1500.00**

TERMS

Date Incurred

**04 21 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed

Outstanding:

**1500.00**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed

Outstanding:

City

State

ZIP Code

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed

Outstanding:

City

State

ZIP Code

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed

Outstanding:

City

State

ZIP Code

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only) ... ▶

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

14021212462



**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 24 OF 30

FOR LINE NUMBER (check only one)  13a  13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLESE. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan **900 00** Cumulative Payment To Date **000** Balance Outstanding at Close of This Period **900 00**

TERMS Date Incurred **04 25 2014** Date Due **NO DUE DATE** Interest Rate **000 % (apr)** Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b> State <b>WY</b> ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>900 00</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

**TOTALS** This Period (last page in this line only) ... .. ▶

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

14021212463

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

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

PAGE 25 OF 36

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>1 000 00</b>	<b>0 00</b>	<b>1 000 00</b>

TERMS Date Incurred Date Due Interest Rate Secured:  
**05 01 2014 NO DUE DATE 0 00 % (apr) Yes  No**

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>1 000 00</b>

2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

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

**TOTALS** This Period (last page in this line only)..... ▶

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

14021212464

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 26 OF 30

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial) <b>HARDY, CHARLES E. - CREDIT CARD ADVANCE</b>	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Mailing Address <b>PO BOX 1951</b>	

City <b>CHEYENNE</b>	State <b>WY</b>	ZIP Code <b>82003-1951</b>
-------------------------	--------------------	-------------------------------

Original Amount of Loan <b>100000</b>	Cumulative Payment To Date <b>000</b>	Balance Outstanding at Close of This Period <b>100000</b>
--	--	--

TERMS	Date Incurred <b>05 02 2014</b>	Date Due <b>NO DUE DATE</b>	Interest Rate <b>000 % (apr)</b>	Secured: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
-------	------------------------------------	--------------------------------	-------------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b>	State <b>WY</b>
ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>100000</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	State
ZIP Code	Amount Guaranteed Outstanding:

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

**TOTALS** This Period (last page in this line only) ... ▶

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

14021212465

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

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

PAGE 27 OF 30

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
**340000 000 340000**

TERMS Date Incurred Date Due Interest Rate Secured:  
**05 23 2014 NO DUE DATE 000 % (apr) Yes  No**

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>340000</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14021212466

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
General  
Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>350 00</b>	<b>000</b>	<b>350 00</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>06 05 2014</b>	<b>NO DUE DATE</b>	<b>000</b> % (apr)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b> State <b>WY</b> ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>350 00</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

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

14021212467

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000	000	250000

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	06 27 2014	NO DUE DATE	000 % (apr)	Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>250000</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only) ..... ▶

**29 2094**

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

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 19 of Schedule C

Federal Election Commission, Washington, D.C. 20469

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>000554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>4500 00</b>	Interest Rate (APR) <b>000</b>
---	----------------------------------	-----------------------------------

Mailing Address <b>Box 15123</b>	Date Incurred or Established <b>02 05 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: **4500 00** Total Outstanding Balance: **4500 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.62(a)(2) and 100.142(e)(2).  
 Date account established: \_\_\_\_\_

Location of account:  
 Address:  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.62 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212469

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 information found on  
 Page 20 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00 554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>950000</b>	Interest Rate (APR) <b>000</b>
---	---------------------------------	-----------------------------------

Mailing Address <b>BOX 15123</b>	Date Incurred or Established <b>02 14 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **950000** Total Outstanding Balance: **950000**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
--	-------	------

14021212470



**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 21 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
--	--

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>250 00</b>	Interest Rate (APR) <b>0 00</b>
---	---------------------------------	------------------------------------

Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 04 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **250 00** Total Outstanding Balance: **250 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212471

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 26 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>3,500.00</b>	Interest Rate (APR) <b>0.00 %</b>
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Mailing Address <b>PO BOX 15129</b>	Date Incurred or Established <b>04 16 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: **3,500.00** Total Outstanding Balance: **3,500.00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212472

**SCHEDULE C-1 (FEC Form 3)  
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
information found on  
Page 23 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>		FEC IDENTIFICATION NUMBER <b>C 00554758</b>	
LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1500 00</b>	Interest Rate (APR) <b>000</b>	
Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 21 2014</b>	Date Due <b>NO DUE DATE</b>	
City <b>WILMINGTON</b>	State <b>DE</b>	Zip Code <b>19850</b>	

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
Amount of this Draw: **1500 00** Total Outstanding Balance: **1500 00**

C. Are other parties secondarily liable for the debt incurred?  
No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
What is the value of this collateral?  
Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER  
Typed Name **DAVID FINLEY** DATE **10 13 2014**  
Signature **David Finley**

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212473

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 24 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>90000</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 25 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred \_\_\_\_\_

B. If line of credit,  
 Amount of this Draw: **900 00** Total Outstanding Balance: **900 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral? \_\_\_\_\_

Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_

What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b>	DATE <b>10 13 2014</b>
Signature <b>David Finley</b>	

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212474

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for  
 Information found on  
 Page 25 of Schedule C

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 0055 4758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1 000 00</b>	Interest Rate (APR) <b>0 00</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 01 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **1 000 00** Total Outstanding Balance: **1 000 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account:  
 Address:  
 Date account established:  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b>	DATE <b>10 13 2014</b>
Signature <b>David Finley</b>	

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212475

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 26 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1 000 00</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 02 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **1 000 00** Total Outstanding Balance: **1 000 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?  
 \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.52(e)(2) and 100.142(e)(2).  
 Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
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H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.52 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212476

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 information found on  
 Page 27 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>3400 00</b>	Interest Rate (APR) <b>0 00</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 23 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **3400 00** Total Outstanding Balance: **340 000**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?  
 \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account:  
 Address:  
 City, State, Zip: \_\_\_\_\_

Date account established:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212477

**SCHEDULE C-1 (FEC Form 3)**

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for  
Information found on  
Page 28 of Schedule C

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>		FEC IDENTIFICATION NUMBER <b>C 00 55 47 58</b>
LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>350 00</b>	Interest Rate (APR) <b>0 00</b>
Meeting Address <b>PO BOX 15123</b>	Date Incurred or Established <b>06 05 2014</b>	
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>	

A. Has loan been restructured?  No  Yes If yes, date originally incurred \_\_\_\_\_

B. If line of credit,  
Amount of this Draw: **350 00** Total Outstanding Balance: **350 00**

C. Are other parties secondarily liable for the debt incurred?  
No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
What is the value of this collateral? \_\_\_\_\_  
Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it secures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
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H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 iii. This institution is aware of the requirement that a loan must be made on a basis which secures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE		DATE
Typed Name	Title	
Signature		

14021212478



**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page 27 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>2500 00</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>06 27 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **2500 00** Total Outstanding Balance: **2500 00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes  (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
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H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
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14021212479

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE <b>20</b> OF <b>30</b>
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RAW IMAGE</b>		Nature of Debt (Purpose): <b>CAMPAIGN VIDEOS AND WEBSITE DEVELOPMENT</b>	
Mailing Address <b>525 HAMPTON LANE</b>			
City <b>KEY BISCANE</b>	State <b>FL</b>	Zip Code <b>33149</b>	
Outstanding Balance Beginning This Period <b>2,462.09</b>			
Amount Incurred This Period <b>0.00</b>	Payment This Period <b>0.00</b>	Outstanding Balance at Close of This Period <b>2,462.09</b>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CITICARDS</b>		Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>	
Mailing Address <b>BOX 6500</b>			
City <b>SIOUX FALLS</b>	State <b>SD</b>	Zip Code <b>57117</b>	
Outstanding Balance Beginning This Period <b>3,995.16</b>			
Amount Incurred This Period <b>3,676.73</b>	Payment This Period <b>1,000.00</b>	Outstanding Balance at Close of This Period <b>6,671.89</b>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AMEX</b>		Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>	
Mailing Address <b>PO BOX 297812</b>			
City <b>FT. LAUDERDALE</b>	State <b>FL</b>	Zip Code <b>33329-7812</b>	
Outstanding Balance Beginning This Period <b>18,658.75</b>			
Amount Incurred This Period <b>357.66</b>	Payment This Period <b>420.00</b>	Outstanding Balance at Close of This Period <b>18,596.41</b>	

1) SUBTOTALS This Period This Page (optional) ...	
2) TOTALS This Period (last page this line number only) ...	<b>27,730.39</b>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...	<b>29,209.41</b>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ...	<b>56,939.80</b>

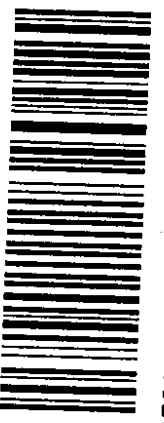
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POST OFFICE

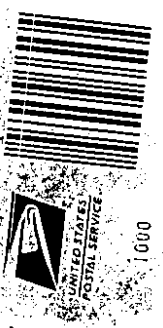
14021212481

INSURE  
MURPHY HARDY FOR SENATE  
CENTRAL AVE. #A  
CHEYENNE, WY 82001  
CO0554758

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  
**CERTIFIED MAIL™**



7014 1200 0000 6651 6221



1000

20510

U.S. POSTAGE  
PAID  
CHEYENNE, WY  
82001  
OCT 23, 14  
AMOUNT

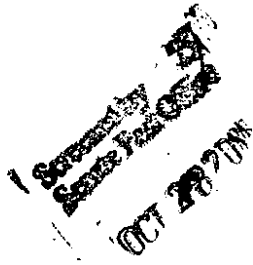
\$5.75  
00071928-08



13-062755

U.S. SENATE  
TRACKING NUMBER

SECRETARY OF THE SENATE  
OFFICE OF PUBLIC RECORDS  
232 HART SENATE OFFICE BLDG  
WASHINGTON, DC 20510-7116



Screened by  
Senate Post Office  
OCT 28 2014

NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HAZY SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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

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

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark **10-23-14**

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

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

### OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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

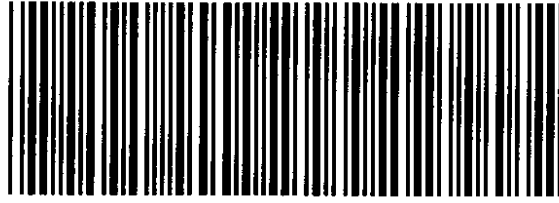
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FAX \_\_\_\_\_  
Date of Receipt

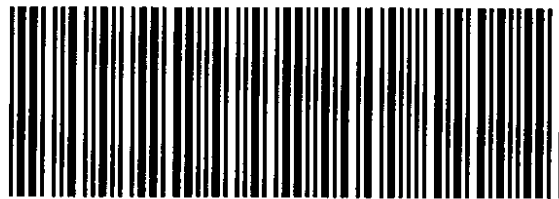
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **10-29-14**

14021212482



SEN PATCH



SEN PATCH

14021212483