

**FEC
FORM 3X**

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

RECEIVED

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

NOV 10 30
FEC MAIL CENTER

NATIONAL ORGANIZATION FOR THE REFORM OF MARIJUANA LAWS POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

1100 H ST, NW

Suite 830

Check if different than previously reported. (ACC)

WASHINGTON DC 20005-5476

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00383604

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [] / [] / [] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [] / [] / [] in the State of []

5. Covering Period

01 01 2014

through

03 31 2014

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

Type or Print Name of Treasurer

R. Keith Stroup

Signature of Treasurer

R. Keith Stroup

Date

11 06 2014

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL ORGANIZATION for the Reform of MARIJUANA LAWS Political Action Committee

Report Covering the Period: From:

01 01 2014

To:

03 31 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees:

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

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts

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

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b)).....

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

—

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

1,240.00

FORM 1 11/11 1 12/11 1 13/11 1 14/11 1 15/11 1 16/11 1 17/11 1 18/11 1 19/11 1 20/11 1 21/11 1 22/11 1 23/11 1 24/11 1 25/11 1 26/11 1 27/11 1 28/11 1 29/11 1 30/11 1 31/11 1 32/11 1 33/11 1 34/11 1 35/11 1 36/11 1 37/11 1 38/11 1 39/11 1 40/11 1 41/11 1 42/11 1 43/11 1 44/11 1 45/11 1 46/11 1 47/11 1 48/11 1 49/11 1 50/11 1 51/11 1 52/11 1 53/11 1 54/11 1 55/11 1 56/11 1 57/11 1 58/11 1 59/11 1 60/11 1 61/11 1 62/11 1 63/11 1 64/11 1 65/11 1 66/11 1 67/11 1 68/11 1 69/11 1 70/11 1 71/11 1 72/11 1 73/11 1 74/11 1 75/11 1 76/11 1 77/11 1 78/11 1 79/11 1 80/11 1 81/11 1 82/11 1 83/11 1 84/11 1 85/11 1 86/11 1 87/11 1 88/11 1 89/11 1 90/11 1 91/11 1 92/11 1 93/11 1 94/11 1 95/11 1 96/11 1 97/11 1 98/11 1 99/11 1 100/11 1

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	600.00	600.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	840.00	840.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1,440.00	1,440.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,440.00	1,440.00

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DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,240.00	1,240.00
34. Total Contribution Refunds (from Line 28(d))	-	-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,240.00	1,240.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-	-
37. Offsets to Operating Expenditures (from Line 15, page 3)	-	-
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-	-

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

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

FOR LINE NUMBER: (check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 (or Full)

NATIONAL ORGANIZATION FOR THE REFORM OF MARIJUANA LAWS Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bellows for Senate

Mailing Address: P.O. Box 136

City: Manchester State: ME Zip Code: 04351

Purpose of Disbursement: Campaign Contribution

Candidate Name: Sheena Bellows

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: ME District: _____

Date of Disbursement

02 18 2014

Amount of Each Disbursement this Period

500.00

B. ~~Harper~~ Bellows for Senate

Mailing Address: P.O. Box 136

City: Manchester State: ME Zip Code: 04351

Purpose of Disbursement: Campaign Contribution

Candidate Name: Sheena Bellows

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: ME District: _____

Date of Disbursement

02 27 2014

Amount of Each Disbursement this Period

100.00

C.

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

____ / ____ / _____

Amount of Each Disbursement this Period

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b		

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NAME OF COMMITTEE (If Full)
NATIONAL ORGANIZATION FOR THE REFORM OF MARYLAND LAWS Political Action Committee

A. **HANGER for GOVERNOR**

Mailing Address: **P.O. Box 4068**

City: **HARRISBURG** State: **PA** Zip Code: **17111**

Purpose of Disbursement: **CAMPAIGN CONTRIBUTION**

Candidate Name: **John Hanger**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **PA** District: _____

Date of Disbursement: **02 27 2014**

Amount of Each Disbursement this Period: **840.00**

B.

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

C.

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

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

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

840.00

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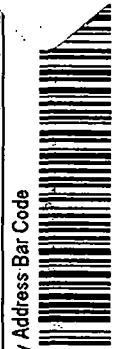


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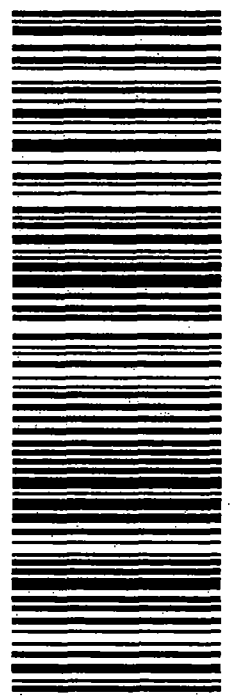
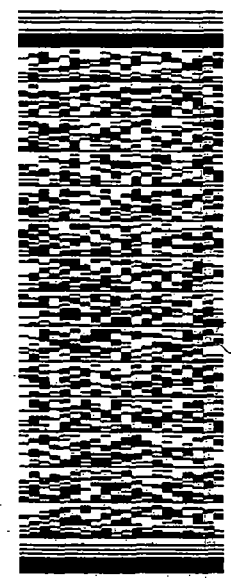
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): Fed Ex	Shipping Date 11/6/14
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

11/7/14
 DATE PREPARED

1-800-438-3030