

SECRETARY OF THE SENATE

14 JUL 23 AM 11:42

July 15, 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 4/1/2014 through 6/30/2014. This report is submitted by the Charlie Hardy for Senate campaign committee, FEC identification number C00554758.

As discussed with the committee's FEC analyst, you should shortly expect to receive an amended report covering the period 1/1/2014 through 3/31/2014.

Sincerely,



David Finley  
Treasurer  
Charlie Hardy for Senate

Encl.

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

14 JUL 23 AM 11:42

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

C00554758

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

ZIP CODE STATE DISTRICT

WY

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M M /

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on M

in the State of

5. Covering Period

04 01 2014

through

06 30 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

06 30 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: **04' 01' 2014**

To: **06' 30' 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))...	6,077.35	23,848.90
(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))...	6,077.35	22,865.30
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	20,767.08	49,173.30
(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))...	20,767.08	49,173.30
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	<b>2,047.18</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>42,626.08</b>	

**For further information contact:**

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

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

1402063490

**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:

MM ' DD ' YYYY  
04 ' 01 ' 2014

To:

MM ' DD ' YYYY  
06 ' 30 ' 2014

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A) ..

232020

1078668

- (ii) Unitemized .....

375715

1306210

- (iii) TOTAL of contributions from individuals

607735

2384890

- (b) Political Party Committees...

000

000

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

000

000

- (d) The Candidate .....

000

000

- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

607735

2384890

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

000

000

13. LOANS:

- (a) Made or Guaranteed by the Candidate...

1440000

2920941

- (b) All Other Loans...

000

000

- (c) TOTAL LOANS (add Lines 13(a) and (b))...

1440000

2920941

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

000

000

15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

000

000

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

2047735

5305831

14020634491

**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...	20,767.08	49,173.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	983.60
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	983.60
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20,767.08	50,156.90

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	2,336.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	20,477.35
25. SUBTOTAL (add Line 23 and Line 24)...	22,814.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	20,767.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2,047.18

14020634492

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

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

FOR LINE NUMBER: PAGE 5 OF 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**CHARLIE HARDY FOR SENATE**

A. Full Name (Last, First, Middle Initial)  
**PASCAL, CAROL M.**

Mailing Address  
**1722 MORRIE AVE.**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**04 30 2014**

Amount of Each Receipt this Period  
**, 500.00**

**, 500.00**

B. Full Name (Last, First, Middle Initial)  
**HARDY, FRANCES**

Mailing Address  
**620 E. 18th STREET**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**05 02 2014**

Amount of Each Receipt this Period  
**, 500.00**

**, 575.95**

C. Full Name (Last, First, Middle Initial)  
**MORRIS, JOHN**

Mailing Address  
**308 WEST 7th AVE.**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**05 18 2014**

Amount of Each Receipt this Period  
**, 250.00**

**, 250.00**

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

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

14020634493

**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 <b>6</b> OF <b>38</b>
	<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>A. Mc GLATHERY, NIKI J.</b>		Date of Receipt <b>06 22 2014</b>
Mailing Address <b>637 VISTA LANE</b>		
City <b>CHEYENNE</b>	State <b>WY</b>	Zip Code <b>82009</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 500.00</b>
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>, 500.00</b>	

Full Name (Last, First; Middle Initial) <b>B. ANSELM, MARK</b>		Date of Receipt <b>05 18 2014</b>
Mailing Address <b>1630 EIK STREET</b>		
City <b>ROCK SPRINGS, WY</b>	State	Zip Code <b>82901</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 570.20</b>
Name of Employer <b>OUTLAW INN</b>	Occupation <b>MANAGER</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>, 670.20</b>	
		<b>MEMO: IN-KIND DONATION OF LODGING COSTS</b>

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

SUBTOTAL of Receipts This Page (optional).....	<b>, 2,370.20</b>
TOTAL This Period (last page this line number only).....	<b>, 2,370.20</b>

14020634494

**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 <b>7</b> OF <b>38</b>	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" 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>A. HARDY, CHARLES E.</b>		Date of Receipt <b>04 04 2014</b>
Mailing Address <b>PO BOX 1951</b>		
City <b>CHEYENNE</b>	State <b>WY</b>	Zip Code <b>82001</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	<b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First; Middle Initial) <b>B. HARDY, CHARLES E.</b>		Date of Receipt <b>04 16 2014</b>
Mailing Address <b>PO BOX 1951</b>		
City <b>CHEYENNE</b>	State <b>WY</b>	Zip Code <b>82001</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>3,500.00</b>
Name of Employer <b>RETIRED</b>	Occupation	<b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First; Middle Initial) <b>C. HARDY, CHARLES E.</b>		Date of Receipt <b>04 21 2014</b>
Mailing Address <b>PO BOX 1951</b>		
City <b>CHEYENNE</b>	State <b>WY</b>	Zip Code <b>82001</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1,500.00</b>
Name of Employer <b>RETIRED</b>	Occupation	<b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

14020634495

**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 <u>8</u> OF <u>38</u>
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" 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**

A. Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E.**

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**04 25 2014**

Amount of Each Receipt this Period  
**900.00**  
**MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE**

B. Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E.**

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**05 01 2014**

Amount of Each Receipt this Period  
**1,000.00**  
**MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE**

C. Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E.**

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** Zip Code **82001**

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

Name of Employer **RETIRED** Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
**05 02 2014**

Amount of Each Receipt this Period  
**1,000.00**  
**MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE**

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

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

14020634496

**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 <u>9</u> OF <u>38</u>
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input checked="" 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) A. <b>HARDY, CHARLES E.</b>		Date of Receipt <b>05 23 2014</b>
Mailing Address <b>PO BOX 1951</b>		Amount of Each Receipt this Period <b>3400.00</b> <b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First; Middle Initial) B. <b>HARDY, CHARLES E.</b>		Date of Receipt <b>06 05 2014</b>
Mailing Address <b>PO BOX 1951</b>		Amount of Each Receipt this Period <b>350.00</b> <b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First; Middle Initial) C. <b>HARDY, CHARLES E.</b>		Date of Receipt <b>06 27 2014</b>
Mailing Address <b>PO BOX 1951</b>		Amount of Each Receipt this Period <b>2500.00</b> <b>MEMO - PERSONAL FUNDS OF CANDIDATE LOANED TO COMMITTEE</b>
City <b>CHEYENNE WY</b>	State Zip Code <b>82001</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>29,209.41</b>	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	<b>14,400.00</b>

1402063497

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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>04 14 2014</b>
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>FT. LAUDERDALE FL</b>	State <b>FL</b>	
Zip Code <b>33329-7812</b>		
Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW 001</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 type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. PIONEER PRINTING</b>		Date of Disbursement <b>03 04 2014</b>
Mailing Address <b>514 W. 19th ST.</b>		Amount of Each Disbursement this Period <b>1,641.62</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 4/14/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>CAMPAIGN LITERATURE PRINTING 001</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 type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement <b>03 07 2014</b>
Mailing Address <b>FRONTIER MALL</b>		Amount of Each Disbursement this Period <b>180.09</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 04/14/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>TELEPHONE 001</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 type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

1402063498

**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>11</b> OF <b>38</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. VERIZON WIRELESS</b>		Date of Disbursement <b>03 07 2014</b>	
Mailing Address <b>FRONTIER MALL</b>		Amount of Each Disbursement this Period <b>78.03</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 04/14/2014</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>TELEPHONE</b>	Category/Type <b>001</b>		
Candidate Name <b>CHARLIE HARDY</b>	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
Disbursement For: <input 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. PIONEER PRINTING</b>		Date of Disbursement <b>03 07 2014</b>	
Mailing Address <b>514 W. 19th ST.</b>		Amount of Each Disbursement this Period <b>742.00</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 04/14/2014</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>CAMPAIGN MATERIALS PRINTING</b>	Category/Type <b>001</b>		
Candidate Name <b>CHARLIE HARDY</b>	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
Disbursement For: <input 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. WYOMING TROPHY + ENGRAVING</b>		Date of Disbursement <b>03 07 2014</b>	
Mailing Address <b>1620 THOMES AVE.</b>		Amount of Each Disbursement this Period <b>172.95</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 04/14/2014</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>CAMPAIGN BUTTONS</b>	Category/Type <b>001</b>		
Candidate Name <b>CHARLIE HARDY</b>	Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: <b>WY</b> District:			

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

1402063499

**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>05 12 2014</b>	
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>99.00</b>	
City <b>FT. LAUDERDALE FL</b> State <b>FL</b> Zip Code <b>33329-7812</b>	Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW</b>		
Candidate Name <b>CHARLIE HARDY</b>			Category/Type <b>001</b>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WY</b> District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>B. WYOMING TROPHY + ENGRAVING</b>		Date of Disbursement <b>03 29 2014</b>	
Mailing Address <b>1620 THOMES AVE.</b>		Amount of Each Disbursement this Period <b>175.86</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 05/12/2014</b>	
City <b>CHEYENNE WY</b> State <b>WY</b> Zip Code <b>82001</b>	Purpose of Disbursement <b>CAMPAIGN BUTTONS</b>		
Candidate Name <b>CHARLIE HARDY</b>			Category/Type <b>001</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WY</b> District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>C. UNITED STATES POSTAL SERVICE</b>		Date of Disbursement <b>04 10 2014</b>	
Mailing Address <b>2120 CAPITOL AVE.</b>		Amount of Each Disbursement this Period <b>4.20</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 05/12/2014</b>	
City <b>CHEYENNE WY</b> State <b>WY</b> Zip Code <b>82001</b>	Purpose of Disbursement <b>POSTAGE</b>		
Candidate Name <b>CHARLIE HARDY</b>			Category/Type <b>001</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>WY</b> District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

14020634500

**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>13</b> OF <b>38</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. VERIZON WIRELESS</b>		Date of Disbursement <b>04 18 2014</b>	
Mailing Address <b>FRONTIER MALL</b>		Amount of Each Disbursement this Period <b>332.08</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 05/12/2014</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>TELEPHONE SERVICE</b>	Category/Type <b>001</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 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. WYOMING TROPHY + ENGRAVING</b>		Date of Disbursement <b>04 19 2014</b>	
Mailing Address <b>1620 THOMES AVE.</b>		Amount of Each Disbursement this Period <b>5.30</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 05/12/2014</b>	
City <b>CHEYENNE WY</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>CAMPAIGN STAMP</b>	Category/Type <b>001</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 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. DELTA AIR LINES</b>		Date of Disbursement <b>04 20 2014</b>	
Mailing Address <b>PO BOX 20706</b>		Amount of Each Disbursement this Period <b>552.00</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 05/12/2014</b>	
City <b>ATLANTA GA</b>	State <b>GA</b>		Zip Code <b>30320-6001</b>
Purpose of Disbursement <b>TRAVEL</b>	Category/Type <b>002</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

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

14020634501

**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 **38**

<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>06 08 2014</b>	
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>188.00</b>	
City <b>FT. LAUDERDALE</b>	State <b>FL</b>		Zip Code <b>33329-7812</b>
Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW</b>	Category/ Type <b>001</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 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. C + D PRINTING</b>		Date of Disbursement <b>04 25 2014</b>	
Mailing Address <b>5351 TENNYSON ST. UNIT C-1</b>		Amount of Each Disbursement this Period <b>1,051.28</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>	
City <b>DENVER, CO</b>	State		Zip Code <b>80212</b>
Purpose of Disbursement <b>PRINTING</b>	Category/ Type <b>001</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 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. OFFICE DEPOT</b>		Date of Disbursement <b>04 27 2014</b>	
Mailing Address <b>1225 DEL RANGE BLVD.</b>		Amount of Each Disbursement this Period <b>5.08</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>CAMPAIGN PRINTING</b>	Category/ Type <b>001</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

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

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

14020634502

**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)

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<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. QUEST COMMUNICATIONS</b>		Date of Disbursement <b>04 29 2014</b>
Mailing Address <b>1801 CALIFORNIA ST.</b>		Amount of Each Disbursement this Period <b>617.56</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>DENVER CO</b>	State <b>CO</b>	
Zip Code <b>80202</b>	Purpose of Disbursement <b>PHONE + INTERNET SVCS.</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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. PIONEER PRINTING</b>		Date of Disbursement <b>05 08 2014</b>
Mailing Address <b>514 W. 19th ST.</b>		Amount of Each Disbursement this Period <b>178.88</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>	Purpose of Disbursement <b>BUMPER STICKERS</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>004</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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. USPS</b>		Date of Disbursement <b>05 12 2014</b>
Mailing Address <b>2120 CAPITOL AVE.</b>		Amount of Each Disbursement this Period <b>29.12</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>	Purpose of Disbursement <b>POSTAGE</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

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

14020634503

**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. DELTA AIR LINES</b>		Date of Disbursement <b>05 13 2014</b>
Mailing Address <b>PO BOX 20706</b>		Amount of Each Disbursement this Period <b>438.00</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>ATLANTA GA</b>	State <b>GA</b>	
Purpose of Disbursement <b>TRAVEL</b>	Zip Code <b>30320-6001</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>002</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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>05 14 2014</b>
Mailing Address <b>4037 E. GRAND AVE.</b>		Amount of Each Disbursement this Period <b>126.64</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>LARAMIE WY</b>	State <b>WY</b>	
Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Zip Code <b>82070</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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. STAPLES</b>		Date of Disbursement <b>05 15 2014</b>
Mailing Address <b>4037 E. GRAND AVE.</b>		Amount of Each Disbursement this Period <b>3.17</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>LARAMIE WY</b>	State <b>WY</b>	
Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Zip Code <b>82070</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

14020634504

**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 **17** OF **38**

<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. STAPLES</b>		Date of Disbursement <b>05 16 2014</b>
Mailing Address <b>4037 E. GRAND AVE.</b>		Amount of Each Disbursement this Period <b>3.49</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>LARAMIE WY</b>	State <b>WY</b>	
Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Zip Code <b>802 82070</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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. MODEL SIGNS</b>		Date of Disbursement <b>05 16 2014</b>
Mailing Address <b>110 CENTER ST.</b>		Amount of Each Disbursement this Period <b>1,003.03</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>ROCK SPRINGS WY</b>	State <b>WY</b>	
Purpose of Disbursement <b>PRINTING YARD SIGNS</b>	Zip Code <b>82901</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>004</b>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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. VERIZON WIRELESS</b>		Date of Disbursement <b>05 20 2014</b>
Mailing Address <b>FRONTIER MALL</b>		Amount of Each Disbursement this Period <b>217.66</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 06/08/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Purpose of Disbursement <b>TELEPHONE</b>	Zip Code <b>82001</b>	
Candidate Name <b>CHARLIE HARDY</b>	Category/Type <b>001</b>	
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:	

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

14020634505

**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>38</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. WYOMING TROPHY + ENGRAVING</b>		Date of Disbursement <b>05 21 2014</b>
Mailing Address <b>1620 THOMES AVE.</b>		Amount of Each Disbursement this Period <b>763.20</b> <b>MEMO - AMEX CREDIT</b> <b>CARD PAYMENT DATED</b> <b>05/08/2014</b>
City <b>CHEYENNE</b>	State <b>WY</b>	
Zip Code <b>82001</b>	Category/ Type <b>004</b>	
Purpose of Disbursement <b>CAMPAIGN T-SHIRTS + PRINTING</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 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. ANSELMI, MARK</b>		Date of Disbursement <b>05 18 2014</b>
Mailing Address <b>1630 ELK STREET</b>		Amount of Each Disbursement this Period <b>570.20</b> <b>MEMO - IN-KIND</b> <b>DONATION FOR</b> <b>LODGING COSTS</b>
City <b>ROCK SPRINGS</b>	State <b>WY</b>	
Zip Code <b>82901</b>	Category/ Type <b>002</b>	
Purpose of Disbursement <b>LODGING FOR CANDIDATE</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 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. THE CIRCUIT PRODUCTIONS</b>		Date of Disbursement <b>04 23 2014</b>
Mailing Address <b>228 NE 59th ST.</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>MIAMI</b>	State <b>FL</b>	
Zip Code <b>33137</b>	Category/ Type <b>004</b>	
Purpose of Disbursement <b>STUDIO RENTAL</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

14020634506

**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 **19** OF **38**

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial)

**A. REMAX CAPITOL PROPERTIES**

Date of Disbursement

Mailing Address

**4000 CENTRAL AVE.**

**04 05 2014**

City **CHEYENNE WY** State Zip Code **82001**

Amount of Each Disbursement this Period

Purpose of Disbursement  
**CAMPAIGN STAFF APT. RENTAL**

**001**

**1,100.00**

Candidate Name  
**CHARLIE HARDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: **WY** District:

Full Name (Last, First, Middle Initial)

**B. REMAX CAPITOL PROPERTIES**

Date of Disbursement

Mailing Address

**4000 CENTRAL AVE.**

**04 05 2014**

City **CHEYENNE WY** State Zip Code **82001**

Amount of Each Disbursement this Period

Purpose of Disbursement  
**CAMPAIGN OFFICE RENTAL**

**001**

**900.00**

Candidate Name  
**CHARLIE HARDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: **WY** District:

Full Name (Last, First, Middle Initial)

**C. REMAX CAPITOL PROPERTIES**

Date of Disbursement

Mailing Address

**4000 CENTRAL AVE.**

**05 02 2014**

City **CHEYENNE WY** State Zip Code **82001**

Amount of Each Disbursement this Period

Purpose of Disbursement  
**CAMPAIGN STAFF APT. RENTAL**

**001**

**1,100.00**

Candidate Name  
**CHARLIE HARDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: **WY** District:

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

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

14020634507

**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>20</b> OF <b>38</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. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>05 02 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>900.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN OFFICE RENTAL</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 type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>05 09 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>343.43</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN OFFICE PHONE SVC.</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 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. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>06 05 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>1100.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN STAFF APT. RENTAL</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

14020634508

**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>21</u> OF <u>38</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. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>06 / 05 / 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>900.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN OFFICE RENTAL</b>		
Candidate Name <b>CHARLIE HARDY</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WY</b> District:	

Full Name (Last, First, Middle Initial) <b>B. COOK, CHRISTOPHER</b>		Date of Disbursement <b>04 / 22 / 2014</b>
Mailing Address <b>1901 CENTRAL AVE., APT 503</b>		Amount of Each Disbursement this Period <b>1350.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN MGR. SALARY</b>		
Candidate Name <b>CHARLIE HARDY</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WY</b> District:	

Full Name (Last, First, Middle Initial) <b>C. COOK, CHRISTOPHER</b>		Date of Disbursement <b>05 / 02 / 2014</b>
Mailing Address <b>1901 CENTRAL AVE., APT 503</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>CAMPAIGN MGR. SALARY</b>		
Candidate Name <b>CHARLIE HARDY</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>WY</b> District:	

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

14020634509

**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>22</u> OF <u>38</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. CITI CARDS</b>		Date of Disbursement <b>05 30 2014</b>
Mailing Address <b>BOX 6500</b>		Amount of Each Disbursement this Period  <b>20.00</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 <b>004</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 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. LITTLE OL' PRINTSHOP</b>		Date of Disbursement <b>04 25 2014</b>
Mailing Address <b>2110 EVANS AVE.</b>		Amount of Each Disbursement this Period  <b>787.30</b> <b>MEMO: CITI CARD PAYMENT DATED 05/30/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>PRINT CAMPAIGN HAND-OUTS</b>		Category/Type <b>004</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 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. LITTLE OL' PRINTSHOP</b>		Date of Disbursement <b>05 08 2014</b>
Mailing Address <b>2110 EVANS AVE.</b>		Amount of Each Disbursement this Period  <b>168.01</b> <b>MEMO: CITICARD PAYMENT DATED 05/30/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>PRINT CAMPAIGN BANNERS</b>		Category/Type <b>004</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b>	District:	

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

14020634510

**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 23 OF 38

<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>06 25 2014</b>	
Mailing Address <b>BOX 6500</b>		Amount of Each Disbursement this Period <b>, 27.85</b>	
City <b>SIoux FALLS</b>	State <b>SD</b>		Zip Code <b>57117</b>
Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW</b>	Category/ Type <b>001</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 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. QUEST COMMUNICATIONS</b>		Date of Disbursement <b>06 09 2014</b>	
Mailing Address <b>1801 CALIFORNIA ST.</b>		Amount of Each Disbursement this Period <b>, 308.72</b> <b>MEMO: CITICARD PAYMENT DATED 06/25/2014</b>	
City <b>DENVER</b>	State <b>CO</b>		Zip Code <b>80202</b>
Purpose of Disbursement <b>PHONE + INTERNET SVCS.</b>	Category/ Type <b>001</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 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.</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).....

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

14020634511

**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>24</u> OF <u>38</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. RAW IMAGE</b>		Date of Disbursement M M D D Y Y Y Y <b>04 16 2014</b>	
Mailing Address <b>525 HAMPTON LANE</b>		Amount of Each Disbursement this Period  <b>, 3,400.00 SEE SCHEDULE D</b>	
City <b>KEY BISCANE FL</b>	State <b>FL</b>		Zip Code <b>33149</b>
Purpose of Disbursement <b>CAMPAIGN VIDEOS+WEB DEVEL.</b>	Category/ Type <b>004</b>		
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input checked="" 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: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>B. RAW IMAGE</b>		Date of Disbursement M M D D Y Y Y Y <b>04 24 2014</b>	
Mailing Address <b>525 HAMPTON LANE</b>		Amount of Each Disbursement this Period  <b>, 1,000.00 SEE SCHEDULE D</b>	
City <b>KEY BISCANE FL</b>	State <b>FL</b>		Zip Code <b>33149</b>
Purpose of Disbursement <b>CAMPAIGN VIDEOS+WEB DEVEL.</b>	Category/ Type <b>004</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 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. RAW IMAGE</b>		Date of Disbursement M M D D Y Y Y Y <b>05 23 2014</b>	
Mailing Address <b>525 HAMPTON LANE</b>		Amount of Each Disbursement this Period  <b>, 3,400.00 SEE SCHEDULE D</b>	
City <b>KEY BISCANE FL</b>	State <b>FL</b>		Zip Code <b>33149</b>
Purpose of Disbursement <b>CAMPAIGN VIDEOS+WEB DEVEL.</b>	Category/ Type <b>004</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 type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

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

14020634512

**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 **25** OF **38**

<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)

**A. RAW IMAGE**

Mailing Address **525 HAMPTON LANE**

City **KEY BISCANE** State **FL** Zip Code **33149**

Purpose of Disbursement  
**CAMPAIGN VIDEOS + WEB DEVEL**

Candidate Name  
**CHARLIE HARDY**

Category/  
Type  
**004**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: **WY** District:

Date of Disbursement

**06 27 2014**

Amount of Each Disbursement this Period

**3,388.80**  
**SEE SCHEDULE D**

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M

Amount of Each Disbursement this Period

, ,

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M

Amount of Each Disbursement this Period

, ,

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

, ,

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

**2,0767.08**

14020634513

**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. PERSONAL FUNDS**

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
809.41	0.00	809.41

TERMS Date Incurred **VARIOUS** 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)	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:

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3	3
<b>TOTALS</b> This Period (last page in this line only) ... ▶	3	3

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

14020634514

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

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

PAGE 27 OF 38  
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. PERSONAL FUNDS**

Mailing Address  
**PO BOX 1951**

Election:  
 Primary  
 General  
 Other (specify) ▼

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

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4,500.00	0.00	4,500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 05 2014	NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" 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: , ,

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	, ,
<b>TOTALS</b> 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.

14020634515

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

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

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. PERSONAL FUNDS**

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  
**9,500.00 0.00 9,500.00**

TERMS Date Incurred Date Due Interest Rate Secured:  
**02 14 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)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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.

14020634516

**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. PERSONAL FUNDS**

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
250.00	0.00	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)	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.

14020634517

**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. PERSONAL FUNDS**

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
3,500.00	0.00	3,500.00

TERMS Date Incurred **04 16 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)	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.

14020634518

**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. PERSONAL FUNDS**

Mailing Address  
**PO BOX 1951**

Election:  
 Primary  
 General  
 Other (specify) ▼

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

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1,500.00	0.00	1,500.00

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)	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.

14020634519

**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. PERSONAL FUNDS**

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
, 900.00	, 000	, 900.00

TERMS Date Incurred Date Due Interest Rate Secured:  
**04 25 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)	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.

14020634520

**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. PERSONAL FUNDS**

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
1,000.00	0.00	1,000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	05 01 2014	NO DUE DATE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" 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.

14020634521

**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. PERSONAL FUNDS**

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
1,000.00	0.00	1,000.00

TERMS Date Incurred Date Due Interest Rate Secured:  
**05 07 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)	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.

14020634522

**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) <b>CHARLIE HARDY FOR SENATE</b>			
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>3,400.00</b>	Cumulative Payment To Date <b>0.00</b>	Balance Outstanding at Close of This Period <b>3,400.00</b>	
TERMS			
Date Incurred <b>05 23 2014</b>	Date Due <b>NO DUE DATE</b>	Interest Rate <b>0.00 % (apr)</b>	Secured: <input type="checkbox"/> Yes <input checked="" 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:
<b>SUBTOTALS</b> This Period This Page (optional)..... ▶			
<b>TOTALS</b> 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.			

14020634523

**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. PERSONAL FUNDS**

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
, 350.00	, 0.00	, 350.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>06 05 2014</b>	<b>"NO DUE DATE"</b>	<b>0.00 % (apr)</b>	<input type="checkbox"/> Yes <input checked="" 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.

14020634524

**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. PERSONAL FUNDS**

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
, 2,500.00	, , 0.00	, 2,500.00

TERMS Date Incurred Date Due Interest Rate Secured:  
**06 27 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)	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) ... ▶ , **79,209.41**

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

14020634525

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line) PAGE 38 OF 38  
 FOR LINE NUMBER: (check only one)  9  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 &amp; WEBSITE DEVELOPMENT</b> <b>SEE SCHEDULE B &amp; LINE 17</b>
Mailing Address <b>575 HAMPTON LANE</b>	
City State Zip Code <b>KEY BISCANE, FL 33149</b>	
Outstanding Balance Beginning This Period , 10,188.89	
Amount Incurred This Period , 3,462.00	Payment This Period , 11,188.80
Outstanding Balance at Close of This Period , 2,462.09	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CITI CARDS</b>	Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>
Mailing Address <b>Box 6500</b>	
City State Zip Code <b>SIoux FALLS, SD 57117</b>	
Outstanding Balance Beginning This Period , 0.00	
Amount Incurred This Period , 1,500.60	Payment This Period , 50.09
Outstanding Balance at Close of This Period , 1,450.51	

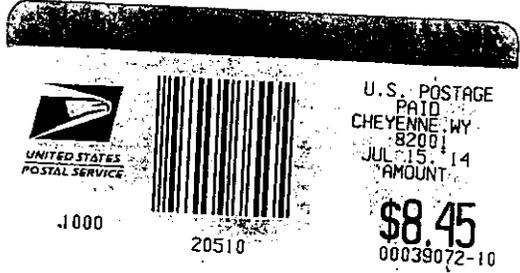
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AMERICAN EXPRESS</b>	Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>
Mailing Address <b>PO BOX 297812</b>	
City State Zip Code <b>FT. LAUDERDALE FL 33329-7812</b>	
Outstanding Balance Beginning This Period , 0.00	
Amount Incurred This Period , 9,841.07	Payment This Period , 337.00
Outstanding Balance at Close of This Period , 9,504.07	

1) SUBTOTALS This Period This Page (optional) ...	,
2) TOTALS This Period (last page this line number only) ...	, 13,416.67
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...	, 29,209.41
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	, 42,626.08

14020634526

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enate Committee



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  
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Office of Public Records  
232 Hart Senate Office Building  
Washington, D.C. 20510-7116

14020634527

FIRST CLASS FIRST CLASS FIRST CLASS FIRST CLASS FIRST CLASS

JANECY ERICKSON  
SECRETARY

JANA K. McCALLUM  
SUPERINTENDENT  
MAIL MAIL OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-71  
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

**7/15/14**

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

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

### OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DEL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

### NEXT BUSINESS DAY DELIVERY

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

POSTMARK ILLEGIBLE  NO POSTMARK

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

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

PREPARER MN DATE PREPARED 7/23/14

14020634528



SEN PATCH



SEN PATCH

14020634529