(Choose One) Report 1 00 10 (Me) 1 May 10 (Me) 1 May 10 (Me) 1 May 10 (Me) (a) Quarterly Reports: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12 (Non-Election Year Only)) April 15 Quarterly Report (Q1) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) X July 15 PRE-Election Primary (12P) General (12G) Runoff (12R) October 15 Quarterly Report (Q3) January 31 Feeroft for the: Convention (12C) Special (12S) July 31 Mid-Year (d) 30-Day (d) 30-Day 30-Day Mar 40 (M3) Mar 40 (M3) Mar 40 (M6)	Image# 201507159000147	/513						PA	GE 1 / 14
COMMITTEE (in full) over the lines. 12 P ± 4 Pis		AND	DISBL	JRSE	MENT	S		Office Use Only	
ADDRESS (number and steet) 13625 Bishops Drive C Ceck, if different than providesly reported. (ACC) Brookfield C Coopadoos STATE ▲ ZIP CODE ▲ C Coopadoos State of State of Due On: Mar 20 (M3) Jup 20 (M12) State of C Couparing Period C1 C1			PRINT V			ng, type	12FE4M5		
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January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Election on Image: Construction of the state of the	(Choose One) (a) Quarterly Report April 15 Quarterly R July 15 Quarterly R	s: eport (Q1)	Peport Le On: 12-Day PRE-Election	Mar 20 (M3) Apr 20 (M4)	Primary (12P	Jun 20 (M6) Jul 20 (M7)	General	20 (M9)	Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
Report for the: Election on Termination Report (TER) Election on 5. Covering Period 04 04 01 2015 through 06 30 2015 through 06 30 1 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 W Ashley Cozine Signature of Treasurer W Ashley Cozine NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §4379. Office Use	January 31 Year-End R July 31 Mid Report (Nor	eport (YE) -Year (d)	30-Day		L			State	
5. Covering Period 04 01 2015 through 06 30 2015 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 W Ashley Cozine Signature of Treasurer W Ashley Cozine [Electronically Filed] Date 07 15 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Office Use Use FEC FORM 3X	Termination				M M /	D D /	Y Y Y Y Y Y		
Type or Print Name of Treasurer W Ashley Cozine [Electronically Filed] Date Display	5. Covering Period				through]
Signature of Treasurer WAshley Cozine [Electronically Filed] Date 07 15 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Office Use Use FEC FORM 3X	-		and to the bes	st of my know	wledge and b	pelief it is true	e, correct and	d complete.	
Signature of Treasurer WAshley Cozine [Electronically Filed] Date 07 15 2015 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 FEC FORM 3X Office Use Image: Submission of false information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.	Type or Print Name of T	reasurer W Ash	ley Cozine						
Office Use FEC FORM 3X Bey, 12/2004	Signature of Treasurer	W Ashley Cozine			[Electronically	Filed] Da			
Office Use FEC FORM 3X Bey, 12/2004	NOTE: Submission of false	e, erroneous, or ir	complete inform	nation may su	bject the pers	son signing thi	is Report to th	ne penalties of 2	U.S.C. §437g.
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	EEC Form 2V (Box 00/0000)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS		Page 2
\\/rito	FEC Form 3X (Rev. 02/2003) or Type Committee Name			Page Z
	ional Funeral Directors Associ	ation of the United States Inc.		
mau	Ional Funeral Directors Associ	alion of the Onlied States inc		
Repor	t Covering the Period: From:	04 / D D / Y Y Y Y 01 2015	To:	06 / D D / Y Y 06 30 2
		COLUMN A This Period		COLUMN B Calendar Year-to-Date
. (a)	Cash on Hand January 1, 2015			4492
(b)	Cash on Hand at Beginning of Reporting Period	39973.37]	
(c)	Total Receipts (from Line 19)	13010.00] [250
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52983.37] [699
. Tot	al Disbursements (from Line 31)	7500.00] [245
	sh on Hand at Close of porting Period			
	btract Line 7 from Line 6(d))	45483.37	L I	454
	bts and Obligations Owed TO Committee (Itemize all on			

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

0.00

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Funeral Directors Association of the United States Inc

Report Covering the Period: From: 04	01 2015 To:	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	4900.00	10900.00
(i) Itemized (use Schedule A)	4300.00	10000.00
	0440.00	14160.00
(ii) Unitemized	8110.00	14100.00
(iii) TOTAL (add	13010.00	25060.00
Lines 11(a)(i) and (ii)▶	13010.00	2000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		7 7 7
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	13010.00	25060.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	7 7 7	
3. All Loans Received	0.00	0.00
1 Lean Panaymenta Pagaiyad	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	7 7	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7 7 7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7 7 7	
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(7 7	, , , ,
(b) Lovin Fundo (from Sobodulo HE)	0.00	0.00
(b) Levin Funds (from Schedule H5)		7 7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	7 7 7	7 7 7
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))►	13010.00	25060.00
D. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	13010.00	25060.00

Page 3

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar fear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	0.00	0.00
Transfers to Affiliated/Other Party		
Committees Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	7500.00	24500.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	, 0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00
(b) Political Party Committees(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ► 	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7500.00	24500.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)►	7500.00	24500.00
· · · · ·	7 7 7	7 7 7

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DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Total Contributions (other than loans) (from Line 11(d), page 3)	13010.00	25060.00				
. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13010.00	25060.00				
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00				
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

SCHEDULE A (FEC Form 3X) _____

FOR LINE NUMBER:

PAGE 6 OF

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a		11b	11c	12										
	y information copied from such Reports and St for commercial purposes, other than using the																		
$\overline{\langle}$	NAME OF COMMITTEE (In Full)			10 0															
\rangle	National Funeral Directors Asso	ciation of	the United States Inc																
Α.	Full Name (Last, First, Middle Initial) Bob Arrington				Date of	Re	ceipt												
	Mailing Address 14 Emerald Ridge			05 14 2015 Transaction ID : SA11AI.18222															
	City	State	Zip Code																
	Jackson	TN	38305	_	Amount	of	Each F	Receipt th	is Period										
	FEC ID number of contributing federal political committee.	С					7	7	250	0.00									
	Name of Employer	Occupation																	
	Arrington Funeral Home	Funeral Dire	ector																
	Receipt For: Primary General	Aggregate	Year-to-Date ▼																
	Other (specify) ▼		250.00																
	Full Name (Last, First, Middle Initial)				Data of	Po	opint												
D.	Mailing Address 555 N Market St								Date of Receipt										
	City	State	Zip Code	-	05		27 on ID :		2015										
	Troy	OH	45373-1417	Transaction ID : SA11AI.18256 Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	С		250	_														
	Name of Employer Baird Funeral Home	Occupation																	
	Receipt For:	Funeral Dire		_															
	Primary General	Aggregate	Year-to-Date ▼																
	Other (specify) v	L	500.00																
с.	Full Name (Last, First, Middle Initial) Scott K Brainard				Date of	Re	ceipt												
	Mailing Address 522 Adams St				0 <u>6</u>	1	01		2015	Y									
	City	State	Zip Code		Trans	act	ion ID :	SA11AI.	18272										
	Wausau	WI	54403-3506	_	Amount	of	Each F	Receipt th	is Period										
	FEC ID number of contributing federal political committee.	С				_	7	- 7	250	0.00									
	Name of Employer	Occupation																	
	Brainard F H & Cremation Cent Receipt For:	Funeral Dire																	
	Primary General	Aggregate	Year-to-Date ▼																
	Other (specify)		250.00																
s	UBTOTAL of Receipts This Page (optional)			<u>_</u>			1	1.40	750	.00									
T	OTAL This Period (last page this line number of	only)		•	<u> </u>		,												

SCHEDULE A (FEC Form 3X)

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$\left.\right\rangle$	NAME OF COMMITTEE (In Full) National Funeral Directors Asso	ciation of	the United States Inc											
A.	Full Name (Last, First, Middle Initial) Sumner Brashears				Date of	Re	ceipt							
	Mailing Address 1003 Paradise Lane			06 01 2015 Transaction ID : SA11AI.18299 Amount of Each Receipt this Period										
	City Huntsville	State AR	Zip Code 72740-9455											
	FEC ID number of contributing federal political committee.	С					7	7	2	50.0	0			
	Name of Employer Brashears FH	Occupation Funeral Dire	ector											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00											
в.	Full Name (Last, First, Middle Initial) John C Carmon				Date of	Re	ceipt							
	Mailing Address PO Box 6	Ototo	Zin Oode		м м 05	/	D D D 11		2015					
	City Windsor	State CT	Zip Code 06001-2505	Transaction ID : SA11AI.18323 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С	5							D				
	Name of Employer Carmon Funeral Home	Occupation Funeral Dire	ector											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00											
<u> </u>	Full Name (Last, First, Middle Initial) Brent D Erickson				Date of	Re	ceipt							
	Mailing Address 200 Huntington Ct				^M M	/	D D 27	/ Y	2015					
	City Darlington	State WI	Zip Code 53530-1313					SA11AI. eceipt th		od				
	FEC ID number of contributing federal political committee.	С					7	-		250.0	0			
	Name of Employer	Occupation												
	Erickson Funeral Home Receipt For:	Funeral Dire		_										
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00											
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PAGE 8 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by an the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Funeral Directors As	ssociation of the United States I	nc
Full Name (Last, First, Middle Initial) Richard W Evans Mailing Address 1705 W Broadway St City Missoula FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MT 59808-2013 C Occupation	Date of Receipt Date of Receipt this Period 250.00 Date of Receipt this Period Date of Receipt this P
Garden City Funeral Home and Crematory Receipt For: Primary General Other (specify) ▼	Funeral Director Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Shelby D. Ferguson II Mailing Address 700 Broad Ave City Belle Vernon FEC ID number of contributing federal political committee.	State Zip Code PA 15012-1513	Date of Receipt this Period 250.00
Name of Employer Ferguson Funeral Home & Crematory Inc Receipt For: Primary General Other (specify) ▼	Occupation Funeral Director Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Karellen K Larrison Mailing Address 300 Country Club Rd City Pratt FEC ID number of contributing federal political committee. Name of Employer Larrison Mortuary Ltd Receipt For: Primary General Other (specify) ▼	State Zip Code KS 67124-3149 C Occupation Funeral Director Aggregate Year-to-Date ▼ 250.00	Date of Receipt Date of Receipt 05 30 2015 Transaction ID : SA11AI.18290 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional))	
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) _ _ _ . _

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PAGE 9 OF

ITEMIZED RECEIPTS		e schedule(s)	(check only one)										
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Any information copied from such Reports and or for commercial purposes, other than using th	I Statements may not be sold o e name and address of any p	or used by any pe	rson for the	purpose of s	oliciting	contribut	tions						
NAME OF COMMITTEE (In Full) National Funeral Directors Ass	ociation of the United	d States Inc											
Full Name (Last, First, Middle Initial) A. Larry D. Ludvigsen			Date of	Receipt									
Mailing Address 1249 E 23rd St			06 16 2015 Transaction ID : SA11AI.18291 Amount of Each Receipt this Period										
City Fremont	State Zip Code NE 68025-245	1											
FEC ID number of contributing federal political committee.	C				7	100	.00						
Name of Employer Ludvigsen Mortuary	Occupation Funeral Director												
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	300.00											
Full Name (Last, First, Middle Initial) B. Sandra Melancon			Date of	Receipt									
Mailing Address P O Box 100			M = M 06	/ D D 16		y y 2015	Y						
City Carencro	State Zip Code LA 70520			action ID : S									
FEC ID number of contributing federal political committee.	C			,		500.	.00						
Name of Employer Melancon Funeral Home	Occupation Funeral Director												
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00											
Full Name (Last, First, Middle Initial) C. Edward J Miller			Date of	Receipt									
Mailing Address 3325 Winton Rd S			05	/ D D 01		2015	Y						
City Rocheester	State Zip Code NY 14623			action ID : S									
FEC ID number of contributing federal political committee.	С					250	.00						
Name of Employer	Occupation												
Miller Funeral Home Receipt For:	Funeral Director		_										
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00											
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Any information copied from such Reports and or for commercial purposes, other than using th				or the		pose of	soliciting	g contri	butio	ns				
NAME OF COMMITTEE (In Full) National Funeral Directors Ass	ociation of	f the United States Inc												
Full Name (Last, First, Middle Initial) A. Edward J Miller				ate of	f Re	eceipt								
Mailing Address 3325 Winton Rd S			05 19 2015											
City Rocheester	State NY	Zip Code 14623	Transaction ID : SA11AI.18215 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С					,	7	5	00.0	0				
Name of Employer Miller Funeral Home	Occupation Funeral Dire													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	1											
Full Name (Last, First, Middle Initial) Joseph Neufeld				ate of	f Re	eceipt								
Mailing Address 88-04 43rd Ave	State	Zip Code	_ [04		25		2015						
Elmhurst	NY	11373-3445				-	<u>SA11AI.</u> eceipt th		od					
FEC ID number of contributing federal political committee.	С					T			50.00	0				
Name of Employer Gerard J Neufeld Inc	Occupation Funeral Dire													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00												
Full Name (Last, First, Middle Initial) C. Peter P. Rossi Jr.				ate of	f Re	eceipt								
Mailing Address 1884 North Rd NE				м м 06	/	D D 16	/ Y	2015						
City Warren	State OH	Zip Code 44483-3653	A				SA11AI. eceipt th		od					
FEC ID number of contributing federal political committee.	С		[7	,		300.0	0				
Name of Employer	Occupation													
Peter Rossi & Son Memorial Chapel Receipt For:	Funeral Dir													
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00												
SUBTOTAL of Receipts This Page (optional)				-		7		10	50.00)				

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 11 OF

т	EMIZED RECEIPTS		Use separate schedule(s)	(check of	(check only one)										
			for each category of the Detailed Summary Page	X 11a	a 🗌	11b 14	11c 15	12	17						
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson for th	ne pu contri	rpose of	soliciting	g contribu	utions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) National Funeral Directors Asso	ciation of	f the United States Inc												
Α.	Full Name (Last, First, Middle Initial) Michael Smith Mailing Address 1525 Hancock St			<u> </u>		eceipt									
					05 14 2015										
	City Port Huron	State MI	Zip Code 48060-2828			tion ID : Each R		18223 nis Period	ł						
	FEC ID number of contributing federal political committee.	С				7		25	0.00						
	Name of Employer	Occupation													
	Smith Family Funeral Home	Funeral Dire	ector												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]											
в.	Full Name (Last, First, Middle Initial) Harold J. Whartnaby			Date	of R	eceipt									
	Mailing Address 311 N Swarthmore Ave				04 25 2015										
	City Ridley Park	State PA	Zip Code 19078-3015	Transaction ID : SA11AI.18235 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				7	- 7	250	0.00						
	Name of Employer White-Luttrell Funeral Homes, Itd	Occupation Funeral Dire													
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 250.00												
С.	Full Name (Last, First, Middle Initial)			Date	of R	eceipt									
	Mailing Address			M			/ Y	Y Y	Y						
	City	State	Zip Code	Amo	unt of	Each R	eceipt th	nis Perioo	d						
	FEC ID number of contributing federal political committee.	С				3									
	Name of Employer	Occupation													
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼												
s	UBTOTAL of Receipts This Page (optional)					7		500	0.00						
т	OTAL This Period (last page this line number	only)				,		4900	0.00						

S	CHEDULE B (FEC Form 3X))P			<u>،</u>		P	AGE	12	OF 14				
	EMIZED DISBURSEMENTS		parate schedule(s)			k only											
			a category of the Summary Page			21b 27	22 28a	×	23 28b	24	;	25 29	26 30b				
	y information copied from such Reports and Staten for commercial purposes, other than using the name																
$\left \right $	NAME OF COMMITTEE (In Full)																
	National Funeral Directors Associa	tion of	the United St	tates	s Ir	C											
Α.	Full Name (Last, First, Middle Initial) Richard BLUMENTHAL						Date of	of Di	sburse	ement							
	Mailing Address 777 SUMMER STREET STE 103						04 21 2015										
	C/O CACACE TUSCH & SANTAG	ATA															
	STAMFORD	State CT	Zip Code 06901		Transaction ID : SB23.18200												
	Purpose of Disbursement		Amount of Each Disbursement this Period														
	Candidate Name			Cate	eaoi	rv/						4.000					
	BLUMENTHAL FOR CONNECTIC	-			ype				7		_	1000	5.00				
		nent For: Primary Other (spe	General														
	State: CT District: 00																
В.	Full Name (Last, First, Middle Initial) PAUL ANTHONY GOSAR						Date of	of Di	sburse	ement							
	Mailing Address PO BOX 2967						M 04	2015	Y								
	City	State	Zip Code				Tran	sact	ion ID) : SB23.	1819	6					
	PRESCOTT	AZ	86302				man	5401									
	Purpose of Disbursement						Amount of Each Disbursement this Period										
	Candidate Name			Cate	egoi	ry/						50	0.00				
	PAUL GOSAR FOR CONGRESS			T	ype			-	7		_	50	0.00				
	Senate X President	nent For: Primary Other (spe	General														
_	State: AZ District: 04																
C.	Full Name (Last, First, Middle Initial) S. BRETT GUTHRIE						Date	of Di	sburse	ement							
	Mailing Address 1005 WRENWOOD DRIVE						^M 06	Л /		D / 8		2015	Y				
		State KY	Zip Code 42103				Tran	sact	ion ID	: SB23.	1819	3					
	Purpose of Disbursement	KI .	42103		_	_											
	Candidate Name						Amou	nt of	Each	Disburs	emer	nt this	Period				
	GUTHRIE FOR CONGRESS			Cate T	egoi ype		1.					1000	0.00				
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General		<u>, , , , , , , , , , , , , , , , , , , </u>				7								
	State: KY District: 02						_										
s	UBTOTAL of Disbursements This Page (optional)					•			,	,		2500	0.00				
Т	OTAL This Period (last page this line number only)					•			,								

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\square	NAME OF COMMITTEE (In Full)																
	National Funeral Directors Associa	tion of	the United S	tates	s Ir	าต											
	Full Name (Last, First, Middle Initial)							Date of Disbursement									
А.	DUNCAN D. HUNTER																
	Mailing Address 9340 Fuerte Drive Suite 302							06 08 2015									
	City	State Zip Code						Transaction ID : SB23.18192									
	La Mesa	CA	91941						11a115aU1011 10 . 3023.10192								
	Purpose of Disbursement							Amount of Each Disbursement this Period							Period		
	Candidate Name			Cate	egory/			1000.00									
	DUNCAN D. HUNTER FOR CONC				ype					7	_		_	1000	5.00		
		ment For:															
	Senate X	Primary	General														
	State: CA District: 50	Other (spe	ecity) 🔻														
_	Full Name (Last, First, Middle Initial)																
В.	ANN KIRKPATRICK							Date of Disbursement									
								M M	/	D	D	/	Y	Y Y	Y		
	Mailing Address 432 WEST CATTLE DRIVE TRAIL						04 21 2015										
	City Standard States St	State AZ	Zip Code 86001				Transaction ID : SB23.18194										
	Purpose of Disbursement																
	Candidate Name							Amount of Each Disbursement this Period									
					Category/				500.00								
	KIRKPATRICK FOR ARIZONA					Туре				7	_			50	0.00		
		ment For:															
	Senate X President	Primary	General														
	State: AZ District: 01	Other (spe	ecny)														
_	Full Name (Last, First, Middle Initial)																
C.	TIMOTHY SCOTT							Date of Disbursement									
	Mailing Address 1405 ASHLEY RIVER ROAD																
	City State Zip Code																
	CHARLESTON SC 29407							Trans	sact	ion ID):	SB23.	1819	7			
	Purpose of Disbursement																
								Amount of Each Disbursement this Period									
	Candidate Name							1000.00									
–	TIM SCOTT FOR SENATE Type Office Sought: House Disbursement For: 2016									7				1000	5.00		
	Y Senate President	Primary Other (spe	General														
	State: SC District: 00	Other (spe	ecity) V														
								_	_	_	_		_				
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ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			k only	one)		,								
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	COMMITTEE (In Full)															
\vee	I Funeral Directors Associ	ation of the United St	ates	s In												
-	Full Name (Last, First, Middle Initial) MIMI WALTERS							Date of Disbursement								
							05 / D D / Y Y Y Y 05 26 2015									
	Mailing Address C/O 8001 IRVINE CENTER DRIVE #400															
	City State Zip Code IRVINE CA 92618 Purpose of Disbursement Incompare to the second seco					Transaction ID : SB23.18199										
					_											
·		Γ.			Amount of Each Disbursement this Period											
				egor	ry/	2500.00										
WALTERS FOR CONGRESS Office Sought: House Disbursement For: 2016 Senate Y Primary General				ype				7		7						
	President	Other (specify)														
State: C/	A District: 45 (Last, First, Middle Initial)															
B.	(Last, First, Middle Initial)					Date o	f Dis	sburse	ment							
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Office Soug		ement For:														
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State:	District:	Other (specify)														
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