

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 16 JUL -7 PM 1:42 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 BELL FOR SENATE

ADDRESS (number and street) PO BOX 31 PALISADES PARK NJ 07650 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00558122 3. IS THIS REPORT NEW (N) OR AMENDED (A) NJ 00

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/04 / DD/01 / YYYY/2016 through MM/06 / DD/30 / YYYY/2016

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 Rich Danker Signature of Treasurer Asst. Rich Danker Date MM/07 / DD/01 / YYYY/2016

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)

201607070200213525

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
04	

 /

D	D
01	

 /

Y	Y	Y	Y
2016			

 To:

M	M
06	

 /

D	D
30	

 /

Y	Y	Y	Y
2016			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	0.00	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	0.00	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	1574.28	511383.76
(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))...	1574.28	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	123.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	13500.63	

For further information contact:

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

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

201607070200213526

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From:

M	M
04	01

 /

Y	Y	Y	Y
2016			

 To:

M	M
06	30

 /

Y	Y	Y	Y
2016			

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)...

0.00

418104.93

(ii) Unitemized

0.00

83019.95

(iii) TOTAL of contributions from individuals

0.00

501124.88

(b) Political Party Committees...

0.00

0.00

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

0.00

65225.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

0.00

566349.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

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

1600.00

35000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

1600.00

35000.00

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

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.08

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

1600.00

601349.96

201607070200213527

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	1574.28	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	200.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	200.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1574.28	546583.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	98.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1600.00
25. SUBTOTAL (add Line 23 and Line 24)...	1698.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	1574.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	123.91

20160707020021258

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
JEFFREY BELL

Mailing Address **132 CHRISTIE ST**

City **LEONIA** State **NJ** Zip Code **07605**

FEC ID number of contributing federal political committee. **C S8NJ00012**

Name of Employer **Bell for Senate** Occupation **Candidate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : **SA13A.9121**

Amount of Each Receipt this Period
500.00

Candidate Loan

B. Full Name (Last, First, Middle Initial)
JEFFREY BELL

Mailing Address **132 CHRISTIE ST**

City **LEONIA** State **NJ** Zip Code **07605**

FEC ID number of contributing federal political committee. **C S8NJ00012**

Name of Employer **Bell for Senate** Occupation **Candidate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : **SA13A.9119**

Amount of Each Receipt this Period
1100.00

Candidate Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1600.00

1600.00

201607070200213529

**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 6 OF 13			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Adobe		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 16.04
City San Jose	State CA Zip Code 95110	
Purpose of Disbursement Software Subscription	Category/Type 001	Transaction ID : SB17.9104
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. Adobe		Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 16.04
City San Jose	State CA Zip Code 95110	
Purpose of Disbursement Software Subscription	Category/Type 001	Transaction ID : SB17.9113
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) C. Adobe		Date of Disbursement MM / DD / YYYY 06 / 16 / 2016
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 16.04
City San Jose	State CA Zip Code 95110	
Purpose of Disbursement Software Subscription	Category/Type 001	Transaction ID : SB17.9114
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional).....	48.12
TOTAL This Period (last page this line number only).....	

201607070200213530

**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Purpose of Disbursement
Credit Card Payment

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

04 / 12 / 2016

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.9106

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Purpose of Disbursement
Credit Card Payment

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

05 / 31 / 2016

Amount of Each Disbursement this Period

811.00

Transaction ID : SB17.9111

Full Name (Last, First, Middle Initial)

C. TCD Compliance

Mailing Address 3365 Cherry Ln
Unit D

City State Zip Code
Woodbury MN 55129

Purpose of Disbursement
Accounting and Reporting

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

06 / 25 / 2016

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.9117

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

1461.00

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

201607070200213531

**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 2213 North Glebe Road

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Bank Fees

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

04 / 29 / 2016

Amount of Each Disbursement this Period

14.00

Transaction ID : SB17.9105

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 2213 North Glebe Road

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Bank Fees

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

05 / 09 / 2016

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.9112

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 2213 North Glebe Road

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Bank Fees

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement

05 / 30 / 2016

Amount of Each Disbursement this Period

14.00

Transaction ID : SB17.9109

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

31.00

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

201607070200212532

**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 9 OF 13			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Bank Fees

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2016

Amount of Each Disbursement this Period
14.00

Transaction ID : SB17.9108

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

14.00

1554.12

201607070200213533

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)
BELL FOR SENATE

Transaction ID : SC/10.8296

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS*
JEFFREY BELL

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1500.00 1000.00 500.00

TERMS Date Incurred Date Due Interest Rate Secured:
M 04 / D 16 / Y 2015 M M / D D / Y 12/31/2015 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)... ▶ [] 500.00
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.

201607070200213534

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)
BELL FOR SENATE

Transaction ID : SC/10.9121

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS*
JEFFREY BELL

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

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

TERMS Date Incurred Date Due Interest Rate Secured:
M 04 / D 12 / Y 2016 M M / D D / Y 12/31/2016 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)... ▶ 500.00
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.

201607070200213535

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) BELL FOR SENATE

Transaction ID : SC/10.9119

LOAN SOURCE Full Name (Last, First, Middle Initial) PERSONAL FUNDS] JEFFREY BELL

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address 132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan 1100.00
Cumulative Payment To Date 0.00
Balance Outstanding at Close of This Period 1100.00

TERMS Date Incurred Date Due Interest Rate Secured:
05 / 24 / 2016 M M D D Y Y Y Y 12/31/2016 0.00 % (apr) Yes No

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

Table with 4 rows for endorsers/guarantors. Columns include Full Name, Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, and Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional)...

1100.00

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

2100.00

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

201607070200213536

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Capital One

Nature of Debt (Purpose):

Credit Card Debt

Mailing Address PO Box 71083

City State

Zip Code

Charlotte

NC

28272

Outstanding Balance Beginning This Period

8315.79

Transaction ID : SD10.5743

Amount Incurred This Period

0.00

Payment This Period

1211.00

Outstanding Balance at Close of This Period

7104.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chase

Nature of Debt (Purpose):

Credit Card Debt

Mailing Address PO Box 15123

City State

Zip Code

Wilmington

DE

19850

Outstanding Balance Beginning This Period

4295.84

Transaction ID : SD10.8167

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4295.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

11400.63

2) TOTALS This Period (last page this line number) ...

11400.63

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

2100.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

13500.63

201607070200213537

Faxed
or
Hand Delivered

201607070200213538

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 7-7-16
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

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

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

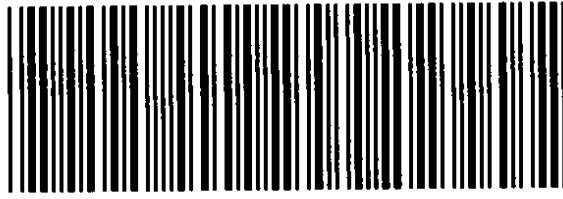
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

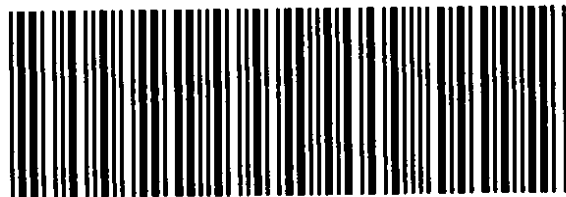
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 7-7-16

201607070200213539



SEN PATCH



SEN PATCH

201607070200213540