

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF STATE PUBLIC

15 APR 30 PM 5:45 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

Check if different than previously reported. (ACC)

PALISADES PARK

NJ

07650

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

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 11 / 04 / 2014

in the State of

NJ

5. Covering Period

MM / DD / YYYY 10 / 16 / 2014

through

MM / DD / YYYY 11 / 24 / 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 Alfred A Angelo

Signature of Treasurer

[Handwritten Signature]

Date

MM / DD / YYYY 04 / 28 / 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.

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
10	

 /

D	D
16	

 /

Y	Y	Y	Y
2014			

 To:

M	M
11	

 /

D	D
24	

 /

Y	Y	Y	Y
2014			

	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)) ..	88312.70	563122.38
(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)) ..	88312.70	562922.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	225144.77	512834.93
(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)) ...	225144.77	512834.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	7707.79	
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) ..	23177.63	

For further information contact:

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

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

15020164558

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 181

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From: MM / DD / YYYY 10 / 16 / 2014 To: MM / DD / YYYY 11 / 24 / 2014

I. RECEIPTS

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of

COLUMN C
Total for

MM / DD / YYYY 11 / 04 / 2014
(date of general election)

MM / DD / YYYY 11 / 05 / 2014
(date after general election)

through

MM / DD / YYYY 11 / 24 / 2014
(last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

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

57800.00

415224.93

7800.00

- (ii) Unitemized

19612.70

79172.45

400.00

- (iii) Total of contributions from individuals

77412.70

494397.38

8200.00

- (b) Political Party Committees

0.00

2000.00

0.00

- (c) Other Political Committees

10900.00

66725.00

100.00

15020164559

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 181

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of *
(date of general election)
(* See page 5 for date)

COLUMN C
Total for * (date after general election)
through * (last day of reporting period)
(* See page 5 for dates)

(d) The Candidate

0.00

0.00

0.00

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

88312.70

563122.38

8300.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate

0.00

30000.00

0.00

(b) All Other Loans

0.00

0.00

0.00

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

0.00

30000.00

0.00

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

0.00

0.00

0.00

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

0.00

0.13

0.00

16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)

88312.70

593122.51

8300.00

15020164540

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 181

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From:

10 / 16 / 2014

To:

11 / 24 / 2014

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
225144.77	512834.93	49043.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	30000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	30000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	200.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

15020164541

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	200.00	0.00
------	--------	------

21. OTHER DISBURSEMENTS

0.00	1636.25	0.00
------	---------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

225144.77	544671.18	49043.54
-----------	-----------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

88312.70	562922.38	8300.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

225144.77	512834.93	49043.54
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	144539.86
24. TOTAL RECIEPTS THIS PERIOD (from Line 16)...	88312.70
25. SUBTOTAL (add Line 23 and Line 24)...	232852.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	225144.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	7707.79

15020164342

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

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

FOR LINE NUMBER: PAGE 7 OF 181

(check only one)

<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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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)
JOHN ANLIAN

Mailing Address **187 ANDERSON AVENUE**

City FAIRVIEW	State NJ	Zip Code 07022
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FEC ID number of contributing federal political committee. **C**

Name of Employer self employed	Occupation attorney at law
-----------------------------------	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

MM / DD / YYYY	10 / 17 / 2014
----------------	----------------

Transaction ID : **SA11AI.7029**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Van Henry Archer

Mailing Address **218 W. Lynwood**

City San Antonio	State TX	Zip Code 78212
----------------------------	--------------------	--------------------------

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

Name of Employer Self	Occupation Ranching, Investment
--------------------------	------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM / DD / YYYY	10 / 16 / 2014
----------------	----------------

Transaction ID : **SA11AI.7589**

Amount of Each Receipt this Period
200.00

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

Mailing Address **551 Horseshoe Hill Rd.**

City Hockessin	State DE	Zip Code 19707
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FEC ID number of contributing federal political committee. **C**

Name of Employer Synchrogenix	Occupation CEO
----------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM / DD / YYYY	10 / 29 / 2014
----------------	----------------

Transaction ID : **SA11AI.7426**

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1450.00

15020164343

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

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

FOR LINE NUMBER: PAGE 8 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
John Brewer

Mailing Address 1 Short Hills Lane

City State Zip Code
Scotch Plains NJ 07670

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2014

Transaction ID : SA11A1.7074

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Marylou Byrd

Mailing Address 33 Sleepy Hollow Road

City State Zip Code
Red Bank NJ 07701

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

Name of Employer Occupation
Self Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SA11A1.7139

Amount of Each Receipt this Period
250.00

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

Mailing Address 633 E Main St
Unit B-1

City State Zip Code
Moorestown NJ 08057

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

Name of Employer Occupation
Renzi Family Medicine,LLC Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SA11A1.7267

Amount of Each Receipt this Period
50.00

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

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

550.00

15020164544

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

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

FOR LINE NUMBER: PAGE 9 OF 181

(check only one)

<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Kent Byron

Mailing Address 314 School Board Dr.

City New Iberia	State LA	Zip Code 70560
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FEC ID number of contributing federal political committee. **C**

Name of Employer Acadiana Plastics Molding	Occupation Chief executive
---	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
11 / 13 / 2014

Transaction ID : SA11AI.7551

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Brian Cahill

Mailing Address 11 Bartlett Ct.

City Matawan	State NJ	Zip Code 07747
-----------------	-------------	-------------------

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

Name of Employer Verizon	Occupation Director
-----------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2014

Transaction ID : SA11AI.7159

Amount of Each Receipt this Period
100.00

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

Mailing Address 1041 Catawba Valley Drive

City Cincinnati	State OH	Zip Code 45226
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SA11AI.7523

Amount of Each Receipt this Period
2600.00

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

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

5300.00

15020164543

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

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

FOR LINE NUMBER: PAGE 10 OF 181
(check only one)

<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Jennifer Chalsty

Mailing Address **24 Taylor Road**

City **Short Hills** State **NJ** Zip Code **07079**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 29 / 2014

Transaction ID : **SA11AI.7078**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Thomas Connors

Mailing Address **30 Kodaya Road**

City **Newton** State **MA** Zip Code **02468**

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

Name of Employer **MFS Investment Management** Occupation **Employee**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
10 / 22 / 2014

Transaction ID : **SA11AI.7005**

Amount of Each Receipt this Period
100.00

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

Mailing Address **2 Virginia Street**

City **Cranford** State **NJ** Zip Code **07016**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
10 / 31 / 2014

Transaction ID : **SA11AI.7026**

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1600.00

15020164546

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

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

FOR LINE NUMBER: PAGE 11 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Martin Czachor, Sr.

Mailing Address 1671 E Boot Rd

City West Chester State PA Zip Code 19380

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 10 / 22 / 2014

Transaction ID : SA11AI.7421

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
maryjane darcangelo

Mailing Address 70 south stone hedge drive

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer not employed Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 10 / 22 / 2014

Transaction ID : SA11AI.7199

Amount of Each Receipt this Period
 250.00

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

Mailing Address 43 Leighton Lane

City Manchester State NJ Zip Code 08759

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 10 / 28 / 2014

Transaction ID : SA11AI.7332

Amount of Each Receipt this Period
 50.00

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

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

800.00

15020164547

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

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

FOR LINE NUMBER: PAGE 12 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
Vincent Dominianni

A. Mailing Address 43 Leighton Lane

City State Zip Code
Manchester NJ 08759

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2014

Transaction ID : SA11AI.7333

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
James Downey

B. Mailing Address 26000 Newbridge Drive

City State Zip Code
Los Altos Hills CA 94022

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

Name of Employer Occupation
Altos Sonoma Corp President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SA11AI.7636

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
MICHAEL DYCKMAN

C. Mailing Address 4 MAJESTIC COURT

City State Zip Code
DIX HILLS NY 11746

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

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SA11AI.7397

Amount of Each Receipt this Period
100.00

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

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

450.00

15020164548

**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 13 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. MICHAEL DYCKMAN			Date of Receipt MM / DD / YYYY 10 / 19 / 2014		
Mailing Address 4 MAJESTIC COURT			Transaction ID : SA11A1.7396		
City DIX HILLS	State NY	Zip Code 11746	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 500.00			
Name of Employer SELF		Occupation ATTORNEY			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) B. MICHAEL DYCKMAN			Date of Receipt MM / DD / YYYY 10 / 24 / 2014		
Mailing Address 4 MAJESTIC COURT			Transaction ID : SA11A1.7395		
City DIX HILLS	State NY	Zip Code 11746	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 550.00			
Name of Employer SELF		Occupation ATTORNEY			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) C. MICHAEL DYCKMAN			Date of Receipt MM / DD / YYYY 10 / 29 / 2014		
Mailing Address 4 MAJESTIC COURT			Transaction ID : SA11A1.7398		
City DIX HILLS	State NY	Zip Code 11746	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 650.00			
Name of Employer SELF		Occupation ATTORNEY			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

15020164549

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

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

FOR LINE NUMBER: PAGE 14 OF 181

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)
MICHAEL DYCKMAN

Mailing Address **4 MAJESTIC COURT**

City **DIX HILLS** State **NY** Zip Code **11746**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : **SA11AI.7669**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
frank femino

Mailing Address **315 ridgewood ave**

City **glen ridge** State **NJ** Zip Code **07026**

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

Name of Employer **femino-ducey-queler orthopedic group** Occupation **orthopedic surgeon**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : **SA11AI.7033**

Amount of Each Receipt this Period
500.00

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

Mailing Address **19 Kingwood Stockton Rd**

City **Stockton** State **NJ** Zip Code **08559**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2014

Transaction ID : **SA11AI.7314**

Amount of Each Receipt this Period
250.00

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

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

850.00

1502016450

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

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

FOR LINE NUMBER: PAGE 15 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Mona Gibson

Mailing Address 144 lake rd

City far hills State NJ Zip Code 07931

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2014

Transaction ID : SA11AI.7209

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lydia Gologovski

Mailing Address 604 Greenwood Ave

City Laurence Harbor State NJ Zip Code 08879

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2014

Transaction ID : SA11AI.7357

Amount of Each Receipt this Period
1000.00

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

Mailing Address 143 Martin Lane

City Alexandria State VA Zip Code 22304

FEC ID number of contributing federal political committee. C

Name of Employer Capital City Partners Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2014

Transaction ID : SA11AI.7472

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

15020164551

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Richard Hemley

Mailing Address **26 Sarah Drive**

City **Farmingdale** State **NY** Zip Code **11735**

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

Name of Employer **Brandon Associates** Occupation **Engineer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YYYY
10	20	2014

Transaction ID : **SA11AI.7394**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Tatnal Hillman

Mailing Address **504 W Bleeker Street**

City **Aspen** State **CO** Zip Code **81611**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

MM	DD	YYYY
11	10	2014

Transaction ID : **SA11AI.7595**

Amount of Each Receipt this Period
2600.00

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

Mailing Address **20458 Waters Point Lane**

City **Germantown** State **MD** Zip Code **20874**

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

Name of Employer **US Dept of Energy** Occupation **Science manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt

MM	DD	YYYY
10	28	2014

Transaction ID : **SA11AI.7449**

Amount of Each Receipt this Period
100.00

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

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

2950.00

1502016452

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

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

FOR LINE NUMBER: PAGE 17 OF 181

(check only one)

<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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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)
J David Hoppe

Mailing Address **5444 Marlstone Lane**

City **Fairfax** State **VA** Zip Code **22030**

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

Name of Employer **Hoppe Strategies** Occupation **lobbyist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **10 / 27 / 2014**
Transaction ID : **SA11AI.7457**

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
Richard Hough

Mailing Address **327 Branch Ave**

City **Little Silver** State **NJ** Zip Code **07739**

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

Name of Employer **Silvercrest Asset Management Group** Occupation **Financial Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **11 / 01 / 2014**
Transaction ID : **SA11AI.7158**

Amount of Each Receipt this Period **1000.00**

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

Mailing Address **178 Rumson Road**

City **Rumson** State **NJ** Zip Code **07760**

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

Name of Employer **Jack Howley** Occupation **financial planning**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : **SA11AI.7171**

Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **2500.00**

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

1502016455

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

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

FOR LINE NUMBER: PAGE 18 OF 181

(check only one)

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) Andrew Johnson		Date of Receipt MM / DD / YYYY 10 / 27 / 2014	
Mailing Address 5891 Merriewood Drive		Transaction ID : SA11AI.7638	
City Oakland	State CA	Zip Code 94611	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00	
Name of Employer Self	Occupation Financial Analyst	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Thomas Kean		Date of Receipt MM / DD / YYYY 10 / 27 / 2014	
Mailing Address PO Box 332		Transaction ID : SA11AI.7211	
City Far Hills	State NJ	Zip Code 07931	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2600.00	
Name of Employer New Jersey	Occupation Former governor	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) James Kemp		Date of Receipt MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 4616 30th St. NW		Transaction ID : SA11AI.7433	
City Washington	State DC	Zip Code 20008	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer Squire Patton Boggs	Occupation legal services	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3350.00

15020164354

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

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

FOR LINE NUMBER: PAGE 19 OF 181

(check only one)

<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
David Keyston

Mailing Address **PO Box 7066**

City **Carmel** State **CA** Zip Code **93921**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt

MM	DD	YYYY
10	16	2014

Transaction ID : **SA11AI.7635**

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Margaret Kniffin

Mailing Address **315 E 86th St
Apt 22D East**

City **New York** State **NY** Zip Code **10028**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt

MM	DD	YYYY
10	17	2014

Transaction ID : **SA11AI.7371**

Amount of Each Receipt this Period

300.00

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

Mailing Address **44 Hamilton Drive East**

City **North Caldwell** State **NJ** Zip Code **07006**

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

Name of Employer **Methessel & Werbel** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

MM	DD	YYYY
10	29	2014

Transaction ID : **SA11AI.7022**

Amount of Each Receipt this Period

250.00

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

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

650.00

15020164553

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

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

FOR LINE NUMBER: PAGE 20 OF 181

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Thomas Lavin

Mailing Address 117 Riverdale Dr.

City Covington State LA Zip Code 70433

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

Name of Employer self Occupation surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **10 / 22 / 2014**

Transaction ID : SA11AI.7547

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
Ralph Loveys

Mailing Address 21 Parker Court

City Florham Park State NJ Zip Code 07932

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **10 / 29 / 2014**

Transaction ID : SA11AI.7215

Amount of Each Receipt this Period **500.00**

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

Mailing Address 700 Princess Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Self Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **10 / 25 / 2014**

Transaction ID : SA11AI.7476

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1000.00**

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

15020164556

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

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

FOR LINE NUMBER: PAGE 21 OF 181

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Richard Maragni

Mailing Address **PO Box 1905**

City **Livingston** State **NJ** Zip Code **07039**

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

Name of Employer **Roman Asphalt Corp.** Occupation **Accountant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
10 / 29 / 2014

Transaction ID : **SA11AI.7044**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Richard Maragni

Mailing Address **PO Box 1905**

City **Livingston** State **NJ** Zip Code **07039**

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

Name of Employer **Roman Asphalt Corp.** Occupation **Accountant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
10 / 31 / 2014

Transaction ID : **SA11AI.7042**

Amount of Each Receipt this Period
100.00

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

Mailing Address **PO Box 1905**

City **Livingston** State **NJ** Zip Code **07039**

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

Name of Employer **Roman Asphalt Corp.** Occupation **Accountant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
10 / 31 / 2014

Transaction ID : **SA11AI.7043**

Amount of Each Receipt this Period
100.00

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

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

300.00

15020164557

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 181
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Jack McKee

Mailing Address 9530 Glynn Downing Dr

City Ooltewah State TN Zip Code 37363

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

Name of Employer McKee Foods Occupation Chief executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
 10 / 24 / 2014

Transaction ID : SA11AI.7512

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Theodore Munday

Mailing Address 16 Steven Rd

City Kendall Park State NJ Zip Code 08824

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 MM / DD / YYYY
 10 / 21 / 2014

Transaction ID : SA11AI.7341

Amount of Each Receipt this Period
200.00

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

Mailing Address 7140 Bronco Drive

City Paradise Valley State AZ Zip Code 85253

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
 10 / 18 / 2014

Transaction ID : SA11AI.7606

Amount of Each Receipt this Period
500.00

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

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

3300.00

1502016455

**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 23 OF 181
	<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Corinne Papsikos

Mailing Address **PO Box 46**

City **Bedminster** State **NJ** Zip Code **07921**

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

Name of Employer **George Papsikos** Occupation **wife/runs office**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
11 / 03 / 2014

Transaction ID : **SA11AI.7202**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Diane Pendleton

Mailing Address **P.O. Box 2717**

City **Ponte Vedra Beach** State **FL** Zip Code **32004**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
11 / 02 / 2014

Transaction ID : **SA11AI.7485**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Leslie Quick III

Mailing Address **11 Chappin Rd**

City **Bernardsville** State **NJ** Zip Code **07924**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 27 / 2014

Transaction ID : **SA11AI.7206**

Amount of Each Receipt this Period
1000.00

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

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

1500.00

1500.00

15020164559

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 181

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Sam Romano

Mailing Address **120 Park Ave**

City **Madison** State **NJ** Zip Code **07940**

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

Name of Employer **Self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **10 / 17 / 2014**
Transaction ID : **SA11AI.7223**

Amount of Each Receipt this Period **2000.00**

B. Full Name (Last, First, Middle Initial)
Linda Runge

Mailing Address **1493 County Rd 519**

City **Frenchtown** State **NJ** Zip Code **08825**

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

Name of Employer **Delaware Valley Nursery** Occupation **Nursery Worker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **10 / 16 / 2014**
Transaction ID : **SA11AI.7343**

Amount of Each Receipt this Period **250.00**

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

Mailing Address **10 East Lane**

City **Madison** State **NJ** Zip Code **07940**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **10 / 31 / 2014**
Transaction ID : **SA11AI.7221**

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **2350.00**

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

15020164560

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

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

FOR LINE NUMBER: PAGE 25 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Edward Ryan

Mailing Address 10 East Lane

City Madison State NJ Zip Code 07940

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 10 / 16 / 2014

Transaction ID : SA11AI.7220

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Richard Schmid

Mailing Address 2500 East Bay Avenue

City Manahawkin State NJ Zip Code 08050

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 10 / 31 / 2014

Transaction ID : SA11AI.7258

Amount of Each Receipt this Period
1000.00

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

Mailing Address 4158 Sterlingview Drive

City Moorpark State CA Zip Code 93021

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

Name of Employer Glen A. Schuberg, Inc. Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 10 / 31 / 2014

Transaction ID : SA11AI.7631

Amount of Each Receipt this Period
250.00

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

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

1350.00

15020164561

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

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

FOR LINE NUMBER: PAGE 26 OF 181

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
Paul Schuberg

Mailing Address **4621 Peppermill St**

City **Moorpark** State **CA** Zip Code **93021**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

MM	DD	YYYY
10	28	2014

Transaction ID : SA11AI.7629

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Chetan Shah

Mailing Address **1 Cardiff Court**

City **West Windsor** State **NJ** Zip Code **08550**

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

Name of Employer **Self** Occupation **Physician - Surgeon**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt

MM	DD	YYYY
10	31	2014

Transaction ID : SA11AI.7313

Amount of Each Receipt this Period

1000.00

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

Mailing Address **PO Box 1049**

City **Crockett** State **TX** Zip Code **75835**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

MM	DD	YYYY
10	22	2014

Transaction ID : SA11AI.7568

Amount of Each Receipt this Period

250.00

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

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

1750.00

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15020164562

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

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

FOR LINE NUMBER: PAGE 27 OF 181

(check only one)

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) Deborah Smarth		Date of Receipt MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 144 Sweetmans Ln		Transaction ID : SA11AI.7146	
City Manalapan	State NJ	Zip Code 07726	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 375.00	
Name of Employer NJ Business Development	Occupation Chief Operating Officer	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) David Smick		Date of Receipt MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 220 I Street, NE Suite 200		Transaction ID : SA11AI.7431	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2600.00	
Name of Employer Self	Occupation Consultant	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Peter Spano		Date of Receipt MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 4001 North Ocean Boulevard		Transaction ID : SA11AI.7494	
City Gulf Stream	State FL	Zip Code 33483	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2500.00	
Name of Employer Retired	Occupation Retired	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

15020164563

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

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

FOR LINE NUMBER: PAGE 28 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Linda Sparks

Mailing Address 6107 Bermuda Dunes Drive

City State Zip Code
Houston TX 77069

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

Name of Employer Occupation
Retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SA11AI.7586

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Water Stingle

Mailing Address 20 West 64 Street

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2014

Transaction ID : SA11AI.7368

Amount of Each Receipt this Period
1000.00

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

Mailing Address 553 Corbett Place

City State Zip Code
Oradell NJ 07649

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

Name of Employer Occupation
Alaric Compliance Chief Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2014

Transaction ID : SA11AI.7372

Amount of Each Receipt this Period
500.00

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

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

1550.00

15020164564

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

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

FOR LINE NUMBER: PAGE 29 OF 181

(check only one)

<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
PATRICK H TERRY

Mailing Address **4 ELLINGTON DR**

City **COLUMBUS** State **NJ** Zip Code **08022**

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

Name of Employer **SELF** Occupation **CHEMICAL ENGINEER (RT)**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : **SA11AI.7241**

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
robert thompson

Mailing Address **11826 village park cir**

City **houston** State **TX** Zip Code **77024**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.7583**

Amount of Each Receipt this Period
2600.00

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

Mailing Address **90 LA SALLE ST.
21F**

City **NEW YORK** State **NY** Zip Code **10027**

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

Name of Employer **self** Occupation **writer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : **SA11AI.7370**

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3650.00

15020164565

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

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

FOR LINE NUMBER: PAGE 30 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
James Trimble

Mailing Address **705 Farmer Court**

City **Port Gibson** State **MS** Zip Code **39150**

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

Name of Employer **CEO** Occupation **PDC Energy**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
10 / 31 / 2014

Transaction ID : **SA11AI.7514**

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Diemer TRUE

Mailing Address **1541 Diamond Dr**

City **Casper** State **WY** Zip Code **82601**

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

Name of Employer **Self** Occupation **Business Man**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 17 / 2014

Transaction ID : **SA11AI.7597**

Amount of Each Receipt this Period
1000.00

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

Mailing Address **3000 North Sheridan Road, Apt. 2C**

City **Chicago** State **IL** Zip Code **60657**

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

Name of Employer **Step toe & Johnson LLP** Occupation **Lawyer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
10 / 17 / 2014

Transaction ID : **SA11AI.7538**

Amount of Each Receipt this Period
250.00

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

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

3850.00

15020164566

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

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

FOR LINE NUMBER: PAGE 31 OF 181

(check only one)

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) Paul Waddelove		Date of Receipt MM / DD / YYYY 10 / 29 / 2014	
Mailing Address 1522 Gingerwood Court		Transaction ID : SA11AI.7465	
City Vienna	State VA	Zip Code 22182	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer PWA	Occupation Construction Management	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Steven Wagner		Date of Receipt MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 410 Constitution Avenue, NE		Transaction ID : SA11AI.7429	
City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00	
Name of Employer QEV Analytics, Ltd	Occupation Business Executive	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) Richard Weicher		Date of Receipt MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 537 N Euclid Ave.		Transaction ID : SA11AI.7536	
City Oak Park	State IL	Zip Code 60302	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00	
Name of Employer BNSF Ry	Occupation Attorney	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

15020164567

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

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

FOR LINE NUMBER: PAGE 32 OF 181

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Richard Weldon

Mailing Address 100 Golf Edge Dr

City Westfield State NJ Zip Code 07090

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

Name of Employer Self Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt

MM / DD / YYYY
10 / 19 / 2014

Transaction ID : SA11AI.7089

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Linda Whipple

Mailing Address 26 Cannon Court

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt

MM / DD / YYYY
10 / 27 / 2014

Transaction ID : SA11AI.7200

Amount of Each Receipt this Period

1500.00

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

Mailing Address 333 Tunnel Road

City Asbury State NJ Zip Code 08802

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

Name of Employer Whitehead Engineering Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SA11AI.7334

Amount of Each Receipt this Period

500.00

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

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

2100.00

15020164568

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

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

FOR LINE NUMBER: PAGE 33 OF 181

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Janice Willett

Mailing Address 207 Prospect St

City: Ridgewood State: NJ Zip Code: 07450

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11AI.7103

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Francis Wilton

Mailing Address 28 Conover Lane

City: Red Bank State: NJ Zip Code: 07701

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 10 / 20 / 2014

Transaction ID : SA11AI.7141

Amount of Each Receipt this Period: 500.00

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

Mailing Address 27 Myrtle Avenue

City: Mill Valley State: CA Zip Code: 94941

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 21 / 2014

Transaction ID : SA11AI.7640

Amount of Each Receipt this Period: 1000.00

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

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

1750.00

15020164569

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

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

FOR LINE NUMBER: PAGE 34 OF 181
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Louis Woodhill

Mailing Address **7 Hampton CT**

City **Houston** State **TX** Zip Code **77024**

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

Name of Employer **Digabit Inc.** Occupation **Director**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11A1.7581**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Margaret Wynne

Mailing Address **1607 N Jefferson St**

City **Arlington** State **VA** Zip Code **22205**

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

Name of Employer **U.S. Government** Occupation **Program Specialist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : **SA11A1.7468**

Amount of Each Receipt this Period
250.00

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

Mailing Address **1607 N Jefferson St**

City **Arlington** State **VA** Zip Code **22205**

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

Name of Employer **U.S. Government** Occupation **Program Specialist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11A1.7467**

Amount of Each Receipt this Period
100.00

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

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

850.00

15020164570

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 181
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) Robert Zarnegin		Date of Receipt MM / DD / YYYY 11 / 13 / 2014
Mailing Address 421 N. Beverly Dr Suite 350		Transaction ID: SA11AI.7610
City Beverly Hills	State CA	
Zip Code 90210		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2600.00
Name of Employer Probity	Occupation Chief executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

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

SUBTOTAL of Receipts This Page (optional)	2600.00
TOTAL This Period (last page this line number only)	57800.00

15020164571

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

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

FOR LINE NUMBER: PAGE 36 OF 181

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
CONSERVATIVE MAJORITY POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 1310

City State Zip Code
HERNDON VA 20172

FEC ID number of contributing federal political committee. **C** C00475582

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SA11C.6983

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
CONSERVATIVE STRIKEFORCE SUPER PAC

Mailing Address 2776 S ARLINGTON MILL DR

City State Zip Code
ARLINGTON VA 22206

FEC ID number of contributing federal political committee. **C** C00542456

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SA11C.6985

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
CONSERVATIVE VICTORY FUND

Mailing Address 801 NORTH PITT STREET
SUITE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : SA11C.6987

Amount of Each Receipt this Period

500.00

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

1750.00

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

15020164572

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

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

FOR LINE NUMBER: PAGE 37 OF 181

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

A. Mailing Address **801 G STREET NW**

Date of Receipt

MM / DD /	YYYY
10 / 31 /	2014

Transaction ID : SA11C.6989

Amount of Each Receipt this Period

4000.00

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00452383**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

B. Full Name (Last, First, Middle Initial)
HUCK PAC

Mailing Address **PO BOX 2008**

Date of Receipt

MM / DD /	YYYY
10 / 31 /	2014

Transaction ID : SA11C.6990

Amount of Each Receipt this Period

2000.00

City State Zip Code
LITTLE ROCK AR 72203

FEC ID number of contributing federal political committee. **C C00448373**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

C. Full Name (Last, First, Middle Initial)
PATRIOT PAC, INC

Mailing Address **4850 WRIGHT ROAD SUITE 168**

Date of Receipt

MM / DD /	YYYY
10 / 20 /	2014

Transaction ID : SA11C.6992

Amount of Each Receipt this Period

250.00

City State Zip Code
STAFFORD TX 77477

FEC ID number of contributing federal political committee. **C C00445080**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

6250.00

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

--

15020164573

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

FOR LINE NUMBER: PAGE 38 OF 181
 Use separate schedule(s) for each category of the Detailed Summary Page
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.
 Mailing Address 1006 PENDLETON STREET
 City State Zip Code
 ALEXANDRIA VA 22314
 FEC ID number of contributing federal political committee. **C** C00377689
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 MM / DD / YYYY
 10 / 28 / 2014
 Transaction ID : SA11C.6994
 Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Republican Municipal Committee of Somerville
 Mailing Address 120 Woods End Drive
 City State Zip Code
 Basking Ridge NJ 07920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 300.00

Date of Receipt
 MM / DD / YYYY
 10 / 17 / 2014
 Transaction ID : SA11C.6996
 Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Spotswood Republican Club
 Mailing Address 85 Herman Drive
 City State Zip Code
 Spotswood NJ 08884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 100.00

Date of Receipt
 MM / DD / YYYY
 11 / 10 / 2014
 Transaction ID : SA11C.6998
 Amount of Each Receipt this Period
 100.00

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

2900.00
 10900.00

15020164574

**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 39 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. AMTG Solutions		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 9803 Allenford Circle #301		Amount of Each Disbursement this Period 97.50 Transaction ID : SB17.8082
City Rockville	State MD	
Purpose of Disbursement Website design		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Damian Bell		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 811.74 Transaction ID : SB17.8109
City Leonia	State NJ	
Purpose of Disbursement Expense reimbursement		Category/ Type 001
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. USPS		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014
Mailing Address 360 Broad Ave		Amount of Each Disbursement this Period 110.26 Transaction ID : SB17.8109.0 [MEMO ITEM]
City Princeton	State NJ	
Purpose of Disbursement Postage		Category/ Type 001
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).....	909.24
TOTAL This Period (last page this line number only).....	

15020164575

**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 40 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Damian Bell		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014	
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 560.00	
City Leonia	State NJ	Zip Code 07605	Transaction ID : SB17.8109.1
Purpose of Disbursement Mileage	Category/ Type 002		[MEMO ITEM]
Candidate Name BELL FOR SENATE	Disbursement For: 2014		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<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. Staples		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014	
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 88.44	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SB17.8109.2
Purpose of Disbursement Office Supplies	Category/ Type 001		[MEMO ITEM]
Candidate Name BELL FOR SENATE	Disbursement For: 2014		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<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. NJ Turnpike		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014	
Mailing Address PO Box 5042		Amount of Each Disbursement this Period 22.90	
City Woodbridge	State NJ	Zip Code 07095	Transaction ID : SB17.8109.3
Purpose of Disbursement Tolls	Category/ Type 002		[MEMO ITEM]
Candidate Name BELL FOR SENATE	Disbursement For: 2014		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ District: 00			

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

15020164576

**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 41 OF 181			
	<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. FedEx		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014
Mailing Address 166 Linwood Plaza		Amount of Each Disbursement this Period 30.14 Transaction ID : SB17.8109.4 [MEMO ITEM]
City Fort Lee	State NJ	
Purpose of Disbursement Printing		Category/ Type 001
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. Jeff Bell		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 646.12 Transaction ID : SB17.8104
City Leonia	State NJ	
Purpose of Disbursement Expense reimbursement		Category/ Type 001
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. Amy's Diner		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 637 High St		Amount of Each Disbursement this Period 14.66 Transaction ID : SB17.8104.0 [MEMO ITEM]
City Burlington	State NJ	
Purpose of Disbursement Food and Beverage		Category/ Type 001
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).....	646.12
TOTAL This Period (last page this line number only).....	

15020164577

**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 42 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address Milepost 116E 11		Amount of Each Disbursement this Period 108.86
City Ridgefield	State NJ	Zip Code 07657
Purpose of Disbursement Gas	Category/ Type 001	Transaction ID : SB17.8104.1
Candidate Name BELL FOR SENATE	[MEMO ITEM]	
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. Quiznos		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address MM124 Garden State Pkwy		Amount of Each Disbursement this Period 19.23
City South AMboy	State NJ	Zip Code 08879
Purpose of Disbursement Food and Beverage	Category/ Type 001	Transaction ID : SB17.8104.2
Candidate Name BELL FOR SENATE	[MEMO ITEM]	
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. NYC Yellow Cab		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period 17.00
City New York	State NY	Zip Code 10004
Purpose of Disbursement Taxi Cab	Category/ Type 002	Transaction ID : SB17.8104.3
Candidate Name BELL FOR SENATE	[MEMO ITEM]	
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).....	0.00
TOTAL This Period (last page this line number only).....	

15020164578

**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 43 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. NJ Turnpike		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address PO Box 5042		Amount of Each Disbursement this Period 32.40 Transaction ID : SB17.8104.4
City Woodbridge	State NJ	
Zip Code 07095	Purpose of Disbursement Tolls	Category/ Type 001
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	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 60.15 Transaction ID : SB17.8104.5
City Teaneck	State NJ	
Zip Code 07666	Purpose of Disbursement Food and Beverage	Category/ Type 001
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	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Delta Gas		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 360 Broad Ave		Amount of Each Disbursement this Period 249.44 Transaction ID : SB17.8104.6
City Leonia	State NJ	
Zip Code 07605	Purpose of Disbursement Gas	Category/ Type 002
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	[MEMO ITEM]

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

15020164379

**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 44 OF 181

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Carluccio's		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 1200 North Rd		Amount of Each Disbursement this Period 27.01
City Northfield	State NJ	
Zip Code 08225	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.8104.7
Candidate Name BELL FOR SENATE	Category/ Type 001	
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)	[MEMO ITEM]
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. Junior's		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 1515 Broadway		Amount of Each Disbursement this Period 92.79
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.8104.8
Candidate Name BELL FOR SENATE	Category/ Type 001	
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)	[MEMO ITEM]
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) c. Morristown Diner		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 73 Morris St		Amount of Each Disbursement this Period 24.58
City Morristown	State NJ	
Zip Code 07960	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.8104.9
Candidate Name BELL FOR SENATE	Category/ Type 001	
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)	[MEMO ITEM]
State: NJ	District: 00	

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

0.00

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

15020164580

**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 45 OF 181			
	<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. Julia Bell		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.8127
City Leonia	State NJ	
Purpose of Disbursement Fundraising consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Nick Bell		Date of Disbursement MM / DD / YYYY 11 / 17 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.8118
City Leonia	State NJ	
Purpose of Disbursement Political consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement MM / DD / YYYY 11 / 13 / 2014
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 39.00 Transaction ID : SB17.8072
City Charlotte	State NC	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional)	7039.00
TOTAL This Period (last page this line number only)	

15020164581

**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 46 OF 181

<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		Date of Disbursement MM / DD / YYYY 11 / 13 / 2014
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 136.65 Transaction ID : SB17.8086
City Charlotte	State NC	
Zip Code 28272	Purpose of Disbursement Credit card fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:	

Full Name (Last, First, Middle Initial) B. Gia Coluccio		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 310 Prospect Ave Apt. 331		Amount of Each Disbursement this Period 353.13 Transaction ID : SB17.8094
City Hackensack	State NJ	
Zip Code 07601	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input checked="" type="checkbox"/> House <input 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. Enterprise		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 149 US Highway 46 W		Amount of Each Disbursement this Period 216.52 Transaction ID : SB17.8094.0 [MEMO ITEM]
City Lodi	State NJ	
Zip Code 07644	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name BELL FOR SENATE	Office Sought: <input checked="" type="checkbox"/> House <input 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).....	489.78
TOTAL This Period (last page this line number only).....	

15020164562

**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 47 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. NJ Turnpike		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address PO Box 5042		Amount of Each Disbursement this Period 73.65
City Woodbridge	State NJ	Zip Code 07095
Purpose of Disbursement Tolls	Category/Type 002	
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	

Transaction ID : SB17.8094.1
[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. NYC Yellow Cab		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period 20.60
City New York	State NY	Zip Code 10004
Purpose of Disbursement Taxi Cab	Category/Type 002	
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	

Transaction ID : SB17.8094.2
[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 13.90
City Leesburg	State VA	Zip Code 20176
Purpose of Disbursement Office Supplies	Category/Type 001	
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	

Transaction ID : SB17.8094.3
[MEMO ITEM]

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

15020164583

**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 48 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
A. Target Printing and Graphics

Mailing Address 9 E Passaic St

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement Printing

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
10 / 17 / 2014

Amount of Each Disbursement this Period
21.96

Transaction ID : SB17.8094.4

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. USPS

Mailing Address 360 Broad Ave

City Princeton State NJ Zip Code 07605

Purpose of Disbursement Postage

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
10 / 17 / 2014

Amount of Each Disbursement this Period
6.50

Transaction ID : SB17.8094.5

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
c. Gia Coluccio

Mailing Address 310 Prospect Ave Apt. 331

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement Communications consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 03 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.8119

SUBTOTAL of Disbursements This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

15020164564

**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 49 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Constant Contact		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014
Mailing Address 17 Battery Pl		Amount of Each Disbursement this Period 147.68 Transaction ID : SB17.8087
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Email communications	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 17 Battery Pl		Amount of Each Disbursement this Period 180.00 Transaction ID : SB17.8088
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Email communications	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Cornerstone Management Partners		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 17 Westminster Gate		Amount of Each Disbursement this Period 3400.00 Transaction ID : SB17.8126
City Bergenfield	State NJ	
Zip Code 07631	Purpose of Disbursement Robo calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	3727.68
TOTAL This Period (last page this line number only).....	

15020164583

**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 50 OF 181	
	<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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Cornerstone Management Partners		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>03</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	11	03	2014
M M	D D	Y Y Y Y						
11	03	2014						
Mailing Address 17 Westminster Gate		Amount of Each Disbursement this Period <table border="1"> <tr> <td>9900.00</td> </tr> </table>	9900.00					
9900.00								
City Bergenfield State NJ Zip Code 07631	Purpose of Disbursement Robo calls Candidate Name	Transaction ID : SB17.8129						
Office Sought: <input type="checkbox"/> House <input 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: District:	Category/Type							

Full Name (Last, First, Middle Initial) B. Cornerstone Management Partners		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>05</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	11	05	2014
M M	D D	Y Y Y Y						
11	05	2014						
Mailing Address 17 Westminster Gate		Amount of Each Disbursement this Period <table border="1"> <tr> <td>10000.00</td> </tr> </table>	10000.00					
10000.00								
City Bergenfield State NJ Zip Code 07631	Purpose of Disbursement Robo calls Candidate Name	Transaction ID : SB17.8130						
Office Sought: <input type="checkbox"/> House <input 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: District:	Category/Type							

Full Name (Last, First, Middle Initial) C. Elizabeth Curtis		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>12</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	11	12	2014
M M	D D	Y Y Y Y						
11	12	2014						
Mailing Address 5 Halifax Ct		Amount of Each Disbursement this Period <table border="1"> <tr> <td>3400.00</td> </tr> </table>	3400.00					
3400.00								
City Marlton State NJ Zip Code 08053	Purpose of Disbursement Fundraising consulting Candidate Name	Transaction ID : SB17.8125						
Office Sought: <input type="checkbox"/> House <input 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: District:	Category/Type							

SUBTOTAL of Disbursements This Page (optional).....	23300.00
TOTAL This Period (last page this line number only).....	

15020164588

**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. Rich Danker		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address PO Box 31		Amount of Each Disbursement this Period 3051.99 Transaction ID : SB17.8121
City Palisades Park	State NJ	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Rich Danker		Date of Disbursement MM / DD / YYYY 11 / 20 / 2014
Mailing Address PO Box 31		Amount of Each Disbursement this Period 3052.01 Transaction ID : SB17.8123
City Palisades Park	State NJ	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) C. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 1900 Rittenhouse Sq		Amount of Each Disbursement this Period 25000.00 Transaction ID : SB17.8132
City Philadelphia	State PA	
Purpose of Disbursement TV advertising		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

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

31104.00

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

15020164587

**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 52 OF 181			
	<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. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014	
Mailing Address 1900 Rittenhouse Sq		Amount of Each Disbursement this Period 60091.50	
City Philadelphia	State PA	Zip Code 19103	Transaction ID : SB17.8134
Purpose of Disbursement Radio advertising		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) B. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014	
Mailing Address 1900 Rittenhouse Sq		Amount of Each Disbursement this Period 918.00	
City Philadelphia	State PA	Zip Code 19103	Transaction ID : SB17.8111
Purpose of Disbursement Ad production		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) C. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1900 Rittenhouse Sq		Amount of Each Disbursement this Period 43082.02	
City Philadelphia	State PA	Zip Code 19103	Transaction ID : SB17.8133
Purpose of Disbursement Radio advertising		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

SUBTOTAL of Disbursements This Page (optional).....	104091.52
TOTAL This Period (last page this line number only).....	

15020164508

**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. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 1900 Rittenhouse Sq		Amount of Each Disbursement this Period 5062.50 Transaction ID : SB17.8128
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Radio advertising		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Gellman Images		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address PO Box 35		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.8115
City Adelphia	State NJ Zip Code 07710	
Purpose of Disbursement Photography		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 06 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 48.20 Transaction ID : SB17.8075
City Teaneck	State NJ Zip Code 07666	
Purpose of Disbursement Meeting expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	6610.70
TOTAL This Period (last page this line number only).....	

1502016458

**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. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 06 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 656.62
City Teaneck	State NJ	Zip Code 07666
Purpose of Disbursement Meeting expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Transaction ID : SB17.8105

Full Name (Last, First, Middle Initial) B. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 06 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 910.60
City Teaneck	State NJ	Zip Code 07666
Purpose of Disbursement Meeting expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Transaction ID : SB17.8110

Full Name (Last, First, Middle Initial) c. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 07 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 9.49
City Teaneck	State NJ	Zip Code 07666
Purpose of Disbursement Meeting expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Transaction ID : SB17.8058

SUBTOTAL of Disbursements This Page (optional).....	1576.71
TOTAL This Period (last page this line number only).....	

15020164590

**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 55 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Glenpointe Marriot		Date of Disbursement MM / DD / YYYY 11 / 07 / 2014
Mailing Address 100 Frank Burr Hwy		Amount of Each Disbursement this Period 1296.04 Transaction ID : SB17.8112
City Teaneck	State NJ	
Zip Code 07666	Purpose of Disbursement Meeting expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:	

Full Name (Last, First, Middle Initial) B. GoDaddy		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 14455 N. Hayden Rd Suite 219		Amount of Each Disbursement this Period 8.99 Transaction ID : SB17.8055
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Web hosting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:	

Full Name (Last, First, Middle Initial) C. GoDaddy		Date of Disbursement MM / DD / YYYY 11 / 20 / 2014
Mailing Address 14455 N. Hayden Rd Suite 219		Amount of Each Disbursement this Period 8.99 Transaction ID : SB17.8056
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Web hosting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1314.02
TOTAL This Period (last page this line number only).....	

15020164391

**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Ampitheatre Pkwy

City Mountain View State CA Zip Code 94041

Purpose of Disbursement
Email communications

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 03 / 2014

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.8078

Full Name (Last, First, Middle Initial)

B. Holiday Inn

Mailing Address 2339 Route 4 E

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 24 / 2014

Amount of Each Disbursement this Period

370.27

Transaction ID : SB17.8096

Full Name (Last, First, Middle Initial)

C. Impressive Printing

Mailing Address 313 10th St

City Carlsdadt State NJ Zip Code 07072

Purpose of Disbursement
Signage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 31 / 2014

Amount of Each Disbursement this Period

500.76

Transaction ID : SB17.8100

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

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

941.03

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15020164592

**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. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Accounting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	27	2014

Amount of Each Disbursement this Period

39.95

Transaction ID : SB17.8073

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Payroll processing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	28	2014

Amount of Each Disbursement this Period

44.70

Transaction ID : SB17.8074

Full Name (Last, First, Middle Initial)

c. New Jersey Department of Treasury

Mailing Address 50 Barrack St

City Trenton State NJ Zip Code 08695

Purpose of Disbursement
Tax payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2014

Amount of Each Disbursement this Period

353.08

Transaction ID : SB17.8092

SUBTOTAL of Disbursements This Page (optional)

437.73

TOTAL This Period (last page this line number only)

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15020164593

**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. PayPal

Mailing Address 2211 North First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Amount of Each Disbursement this Period

74.74

Transaction ID : SB17.8079

Full Name (Last, First, Middle Initial)

B. Political Media Inc.

Mailing Address 406 First St SE
3rd Fl

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising mail

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period

3370.00

Transaction ID : SB17.8124

Full Name (Last, First, Middle Initial)

c. Rao Group

Mailing Address 4020 Amyington Dr

City Charlotte State NC Zip Code 28226

Purpose of Disbursement
Fundraising mail

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2014

Amount of Each Disbursement this Period

408.70

Transaction ID : SB17.8097

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

3853.44

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

15020164594

**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. Rao Group		Date of Disbursement MM / DD / YYYY 11 / 07 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 731.37 Transaction ID : SB17.8107
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Rao Group		Date of Disbursement MM / DD / YYYY 11 / 07 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 778.39 Transaction ID : SB17.8108
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Rao Group		Date of Disbursement MM / DD / YYYY 11 / 07 / 2014
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 1461.02 Transaction ID : SB17.8113
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Fundraising mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2970.78
TOTAL This Period (last page this line number only).....	

15020164595

**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 60 OF 181	
	<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)
BELL FOR SENATE

A. Rao Group

Full Name (Last, First, Middle Initial)
Mailing Address 4020 Amyington Dr

City Charlotte State NC Zip Code 28226

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 07 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.8120

B. Rao Group

Full Name (Last, First, Middle Initial)
Mailing Address 4020 Amyington Dr

City Charlotte State NC Zip Code 28226

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 24 / 2014

Amount of Each Disbursement this Period
18226.40

Transaction ID : SB17.8131

c. Staples

Full Name (Last, First, Middle Initial)
Mailing Address 1019 B Edwards Ferry Road

City Leesburg State VA Zip Code 20176

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 20 / 2014

Amount of Each Disbursement this Period
3.18

Transaction ID : SB17.7974

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

21229.58

15020164596

**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. Staples		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 300.38 Transaction ID : SB17.8089
City Leesburg	State VA	
Purpose of Disbursement Office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 4.77 Transaction ID : SB17.8033
City Leesburg	State VA	
Purpose of Disbursement Office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 3.18 Transaction ID : SB17.7975
City Leesburg	State VA	
Purpose of Disbursement Office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	308.33
TOTAL This Period (last page this line number only).....	

15020164597

**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. Staples		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014	
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 6.41	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SB17.8036
Purpose of Disbursement Office supplies		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 3.18	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SB17.7976
Purpose of Disbursement Office supplies		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 1019 B Edwards Ferry Road		Amount of Each Disbursement this Period 9.59	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SB17.8059
Purpose of Disbursement Office supplies		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	19.18
TOTAL This Period (last page this line number only).....	

15020164596

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7745
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7746
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7747
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	1.77
TOTAL This Period (last page this line number only).....	

15020164599

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7748
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7766
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7767
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

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

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

2.07

15020164600

**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 65 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7858
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7859
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7860
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3.09
TOTAL This Period (last page this line number only).....	

15020164601

**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 66 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7861
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7862
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7863
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	3.09
TOTAL This Period (last page this line number only).....	

15020164602

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7864

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7865

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7866

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3.09

15020164603

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.17 Transaction ID : SB17.7868
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.17 Transaction ID : SB17.7869
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.32 Transaction ID : SB17.7873
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

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

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

3.66

15020164604

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.32 Transaction ID : SB17.7874
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7963
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7964
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	4.82
TOTAL This Period (last page this line number only).....	

15020164603

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7965

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7966

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7967

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

5.25

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

15020164606

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7968
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7969
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7970
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	5.25
TOTAL This Period (last page this line number only).....	

15020164607

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7971
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7972
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7973
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5.25
TOTAL This Period (last page this line number only).....	

15020164608

**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 73 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8026

Category/
Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8027

Category/
Type

C. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8028

Category/
Type

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

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

9.60

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15020164009

**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 74 OF 181

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8029

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8030

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8031

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

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

9.60

15020164610

**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 75 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8032
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 29.30 Transaction ID : SB17.8071
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7743
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	33.09
TOTAL This Period (last page this line number only).....	

15020164611

**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 76 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7744
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7855
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7856
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2.65
TOTAL This Period (last page this line number only).....	

15020164612

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7857
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.34 Transaction ID : SB17.7875
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7957
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

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

4.12

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

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15020164613

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7958
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7959
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7960
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5.25
TOTAL This Period (last page this line number only).....	

15020164614

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7961
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7962
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8025
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	6.70
TOTAL This Period (last page this line number only).....	

15020164615

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.8053
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.8054
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 14.80 Transaction ID : SB17.8065
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

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

29.90

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

15020164616

**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 81 OF 181
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.46 Transaction ID : SB17.7877
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7951
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7952
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional)	4.96
TOTAL This Period (last page this line number only)	

15020164617

**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

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 18 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7953

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 18 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7954

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 18 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7955

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5.25

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

15020164616

**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 83 OF 181
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7956
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8024
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7852
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	5.98
TOTAL This Period (last page this line number only).....	

15020164619

**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 84 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7853
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7854
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7950
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional)	3.81
TOTAL This Period (last page this line number only)	

15020164620

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 19 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.8020

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 19 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.8021

Category/Type

C. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 19 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.8022

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 9.60

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

1204161621

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 19 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8023

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 19 / 2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.8035

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 19 / 2014

Amount of Each Disbursement this Period

14.80

Transaction ID : SB17.8064

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

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

24.10

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15020164622

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.88
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2.94
TOTAL This Period (last page this line number only)	

15020164623

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 20 / 2014		

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7851

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 20 / 2014		

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7947

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 20 / 2014		

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7948

Category/
Type

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

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

4.53

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15020164624

**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 10	D D 20	Y Y Y Y 2014
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Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7949

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 10	D D 20	Y Y Y Y 2014
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Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8017

Category/
Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M 10	D D 20	Y Y Y Y 2014
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Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8018

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

8.15

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15020164625

**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

A. Stripe Full Name (Last, First, Middle Initial) Mailing Address 3180 18th St STE 100 City San Francisco State CA Zip Code 94110 Purpose of Disbursement Credit card fee Candidate Name Office Sought: <input type="checkbox"/> House <input 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: District:		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014 Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8019 Category/ Type
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B. Stripe Full Name (Last, First, Middle Initial) Mailing Address 3180 18th St STE 100 City San Francisco State CA Zip Code 94110 Purpose of Disbursement Credit card fee Candidate Name Office Sought: <input type="checkbox"/> House <input 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: District:		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014 Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.8052 Category/ Type
--	--	--

c. Stripe Full Name (Last, First, Middle Initial) Mailing Address 3180 18th St STE 100 City San Francisco State CA Zip Code 94110 Purpose of Disbursement Credit card fee Candidate Name Office Sought: <input type="checkbox"/> House <input 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: District:		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014 Amount of Each Disbursement this Period 22.05 Transaction ID : SB17.8066 Category/ Type
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SUBTOTAL of Disbursements This Page (optional).....	32.80
TOTAL This Period (last page this line number only).....	[Empty Box]

15020164626

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	20	2014

Amount of Each Disbursement this Period

58.30

Transaction ID : SB17.8077

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	21	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7845

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	21	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7846

Category/
Type

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

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

60.36

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15020164627

**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 92 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7847

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7848

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7942

Category/
Type

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

3.81

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

--

15020164628

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7943

Category/
Type

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7944

Category/
Type

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7945

Category/
Type

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

5.25

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

--

15020164629

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7946

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8016

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 21 / 2014

Amount of Each Disbursement this Period

29.30

Transaction ID : SB17.8070

Category/
Type

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

34.25

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

--

15020164630

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	21	2014

Amount of Each Disbursement this Period

75.70

Transaction ID : SB17.8081

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	22	2014

Amount of Each Disbursement this Period

0.45

Transaction ID : SB17.7729

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	22	2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.7742

Category/
Type

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

76.74

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

--

15020164631

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7832

Category/
Type

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7833

Category/
Type

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7834

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

3.09

TOTAL This Period (last page this line number only)

--

15020164632

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7835

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7836

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7837

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

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

3.09

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15020164635

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y
10 / 22 / 2014		

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7838

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y
10 / 22 / 2014		

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7839

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y
10 / 22 / 2014		

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7840

Category/
Type

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

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

3.09

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15020164634

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 22 / 2014		

Amount of Each Disbursement this Period

Amount	1.03
--------	------

Transaction ID : SB17.7841

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 22 / 2014		

Amount of Each Disbursement this Period

Amount	1.03
--------	------

Transaction ID : SB17.7842

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10 / 22 / 2014		

Amount of Each Disbursement this Period

Amount	1.03
--------	------

Transaction ID : SB17.7843

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

Amount	3.09
--------	------

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

Amount	
--------	--

15020164635

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7844

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7934

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7935

Category/
Type

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

4.53

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

--

15020164636

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7936
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7937
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7938
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	5.25
TOTAL This Period (last page this line number only).....	

15020164637

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7939

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7940

Category/
Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 22 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7941

Category/
Type

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

5.25

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

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15020164638

**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 103 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8011

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8012

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	22	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8013

Category/
Type

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

9.60

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

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15020164639

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8014

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8015

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2014

Amount of Each Disbursement this Period

7.55

Transaction ID : SB17.8048

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

13.95

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

15020164640

**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 105 OF 181	
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8049
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8050
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8051
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	22.65
TOTAL This Period (last page this line number only)	

15020164641

**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 106 OF 181	
	<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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 22 / 2014

Amount of Each Disbursement this Period
14.80

Transaction ID : SB17.8063

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period
0.45

Transaction ID : SB17.7728

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period
0.55

Transaction ID : SB17.7731

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 15.80

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

15020164642

**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 107 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.7740

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.7741

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

0.88

Transaction ID : SB17.7771

SUBTOTAL of Disbursements This Page (optional)

2.06

TOTAL This Period (last page this line number only)

15020164643

**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)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

0.88

Transaction ID : SB17.7772

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7827

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7828

Category/
Type

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

2.94

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

15020164644

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7829

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7830

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7831

Category/
Type

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

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

3.09

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15020164643

**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 110 OF 181	
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.69 Transaction ID : SB17.7878
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7927
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7928
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	5.19
TOTAL This Period (last page this line number only).....	

15020164646

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7929

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7930

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7931

Category/
Type

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

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

5.25

--

15020164647

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7932

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7933

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8001

SUBTOTAL of Disbursements This Page (optional)

6.70

TOTAL This Period (last page this line number only)

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15020164648

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8002

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8003

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
10	23	2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8004

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

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

9.60

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15020164649

**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 114 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8005
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8006
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.8007
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.60
TOTAL This Period (last page this line number only).....	

15020164650

**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 115 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8008
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8009
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 23 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8010
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional)	9.60
TOTAL This Period (last page this line number only)	

15020164651

**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 116 OF 181			
	<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7739

Category/
Type

Full Name (Last, First, Middle Initial)
B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
0.74

Transaction ID : SB17.7765

Category/
Type

Full Name (Last, First, Middle Initial)
c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7823

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 2.36

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

15020164652

**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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7824

Category/
Type

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7825

Category/
Type

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7826

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3.09

15020164633

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 24 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7921

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 24 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7922

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 24 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7923

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

5.25

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

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15020164654

**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 119 OF 181			
	<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7924

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7925

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7926

Category/Type

SUBTOTAL of Disbursements This Page (optional) 5.25

TOTAL This Period (last page this line number only)

15020164655

**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 120 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.8000

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7822

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2014

Amount of Each Disbursement this Period

7.55

Transaction ID : SB17.8047

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

11.78

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

12020164656

**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 121 OF 181			
	<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 25 / 2014

Amount of Each Disbursement this Period
9.00

Transaction ID : SB17.8057

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 26 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7738

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 26 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7821

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 10.62

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

15020164657

**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 122 OF 181	
	<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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)		Date of Disbursement						
A. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>27</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	27	2014
M M	D D	Y Y Y Y						
10	27	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period						
City San Francisco	State CA							
Purpose of Disbursement Credit card fee	Zip Code 94110	<table border="1"> <tr> <td>0.45</td> </tr> </table>	0.45					
0.45								
Candidate Name	Category/ Type	Transaction ID : SB17.7727						
Office Sought: <input type="checkbox"/> House <input 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: District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement						
B. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>27</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	27	2014
M M	D D	Y Y Y Y						
10	27	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period						
City San Francisco	State CA							
Purpose of Disbursement Credit card fee	Zip Code 94110	<table border="1"> <tr> <td>0.74</td> </tr> </table>	0.74					
0.74								
Candidate Name	Category/ Type	Transaction ID : SB17.7762						
Office Sought: <input type="checkbox"/> House <input 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: District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement						
C. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>27</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	27	2014
M M	D D	Y Y Y Y						
10	27	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period						
City San Francisco	State CA							
Purpose of Disbursement Credit card fee	Zip Code 94110	<table border="1"> <tr> <td>0.74</td> </tr> </table>	0.74					
0.74								
Candidate Name	Category/ Type	Transaction ID : SB17.7763						
Office Sought: <input type="checkbox"/> House <input 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: District:								

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>1.93</td> </tr> </table>	1.93
1.93		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

15020164658

**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 123 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
0.74

Transaction ID : SB17.7764

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7817

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7818

Category/Type

SUBTOTAL of Disbursements This Page (optional) 2.80

TOTAL This Period (last page this line number only)

15020164659

**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 124 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7819

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7820

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period

1.32

Transaction ID : SB17.7872

SUBTOTAL of Disbursements This Page (optional)

3.38

TOTAL This Period (last page this line number only)

15020164660

**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 125 OF 181			
	<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. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7916

Category/
Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7917

Category/
Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7918

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 5.25

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

15020164661

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7919
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7920
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7999
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

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

6.70

15020164662

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period

14.80

Transaction ID : SB17.8061

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period

14.80

Transaction ID : SB17.8062

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2014

Amount of Each Disbursement this Period

0.74

Transaction ID : SB17.7761

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

30.34

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

15020164663

**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 128 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7813
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input 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:	District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7814
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input 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:	District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7815
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input 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:	District:		

SUBTOTAL of Disbursements This Page (optional).....	3.09
TOTAL This Period (last page this line number only).....	

15020164664

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7816

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7914

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7915

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

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

4.53

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15020164665

**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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7997
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7998
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 28 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 29.30 Transaction ID : SB17.8069
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

SUBTOTAL of Disbursements This Page (optional).....	35.70
TOTAL This Period (last page this line number only).....	

15020164666

**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 131 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

0.45

Transaction ID : SB17.7726

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

0.50

Transaction ID : SB17.7730

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

0.74

Transaction ID : SB17.7757

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

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

1.69

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15020164667

**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

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period: 0.74

Transaction ID : SB17.7758

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period: 0.74

Transaction ID : SB17.7759

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period: 0.74

Transaction ID : SB17.7760

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2.22

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

15020164668

**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 133 OF 181	
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.88 Transaction ID : SB17.7770
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7797
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7798
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	2.94
TOTAL This Period (last page this line number only).....	

15020164669

**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 134 OF 181			
	<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. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7799

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7800

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7801

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3.09

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

15020164670

**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 135 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7802

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7803

Category/
Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7804

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

3.09

TOTAL This Period (last page this line number only)

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15020164671

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7805

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7806

Category/
Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.7807

Category/
Type

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

3.09

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

15020164672

**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 137 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7808
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7808
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7810
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	3.09
TOTAL This Period (last page this line number only).....	

15020164675

**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 138 OF 181			
	<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7811

Category/
Type

Full Name (Last, First, Middle Initial)
B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7812

Category/
Type

Full Name (Last, First, Middle Initial)
c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7903

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 3.81

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

15020164674

**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 139 OF 181	
	<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

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

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St STE 100		Date of Disbursement							
City San Francisco State CA Zip Code 94110		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>10</td> <td>29</td> <td>2014</td> </tr> </table>		MM	DD	YYYY	10	29	2014
MM	DD	YYYY							
10	29	2014							
Purpose of Disbursement Credit card fee		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>1.75</td> </tr> </table>		1.75					
1.75									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014							
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
Category/Type		Transaction ID : SB17.7904							

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St STE 100		Date of Disbursement							
City San Francisco State CA Zip Code 94110		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>10</td> <td>29</td> <td>2014</td> </tr> </table>		MM	DD	YYYY	10	29	2014
MM	DD	YYYY							
10	29	2014							
Purpose of Disbursement Credit card fee		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>1.75</td> </tr> </table>		1.75					
1.75									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014							
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
Category/Type		Transaction ID : SB17.7905							

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St STE 100		Date of Disbursement							
City San Francisco State CA Zip Code 94110		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>10</td> <td>29</td> <td>2014</td> </tr> </table>		MM	DD	YYYY	10	29	2014
MM	DD	YYYY							
10	29	2014							
Purpose of Disbursement Credit card fee		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td>1.75</td> </tr> </table>		1.75					
1.75									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014							
State: District:		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
Category/Type		Transaction ID : SB17.7906							

SUBTOTAL of Disbursements This Page (optional).....	5.25
TOTAL This Period (last page this line number only).....	

15020164675

**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 140 OF 181	
	<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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7907

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7908

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7909

Category/Type

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

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

5.25

15020164676

**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 141 OF 181

<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7910

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7911

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
10	29	2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7912

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

5.25

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

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15020164677

**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 142 OF 181

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 29 / 2014

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.7913

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 29 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.7992

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 29 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.7993

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

8.15

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

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15020164678

**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 143 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.7994

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.7995

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
3.20

Transaction ID : SB17.7996

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 9.60

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

15020164679

**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 144 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Transaction ID : SB17.8045
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Transaction ID : SB17.8046
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 29 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 29.30
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Transaction ID : SB17.8068
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	44.40
TOTAL This Period (last page this line number only).....	

15020164680

**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 145 OF 181			
	<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)
BELL FOR SENATE

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7734

Category/
Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7735

Category/
Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7736

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 1.77

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

15020164001

**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 146 OF 181	
	<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

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

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7737
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7793
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Transaction ID : SB17.7794
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	2.65
TOTAL This Period (last page this line number only).....	

15020164682

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7795

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7796

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.32

Transaction ID : SB17.7871

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 3.38

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

15020164683

**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 148 OF 181			
	<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. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7894

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7895

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7896

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5.25

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

15020164684

**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 149 OF 181			
	<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. Stripe		Date of Disbursement
Mailing Address 3180 18th St STE 100		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="1.75"/>
Candidate Name		Transaction ID : SB17.7897
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement
Mailing Address 3180 18th St STE 100		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="1.75"/>
Candidate Name		Transaction ID : SB17.7898
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement
Mailing Address 3180 18th St STE 100		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Credit card fee	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="1.75"/>
Candidate Name		Transaction ID : SB17.7899
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="5.25"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

15020164685

**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 150 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7900

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7901

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7902

Category/Type

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

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

5.25

15020164688

**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 151 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 10/30/2014

Amount of Each Disbursement this Period: 3.20

Transaction ID : SB17.7989

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 10/30/2014

Amount of Each Disbursement this Period: 3.20

Transaction ID : SB17.7990

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 10/30/2014

Amount of Each Disbursement this Period: 3.20

Transaction ID : SB17.7991

Category/Type

SUBTOTAL of Disbursements This Page (optional) 9.60

TOTAL This Period (last page this line number only)

15020164687

**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 152 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
14.80

Transaction ID : SB17.8060

Category/
Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 30 / 2014

Amount of Each Disbursement this Period
75.70

Transaction ID : SB17.8080

Category/
Type

Full Name (Last, First, Middle Initial)

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.7733

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 91.09

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

15020164688

**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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 10	DD 31	YYYY 2014
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Amount of Each Disbursement this Period

0.68

Transaction ID : SB17.7749

Category/
Type

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 10	DD 31	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

0.74

Transaction ID : SB17.7753

Category/
Type

C. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM 10	DD 31	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

0.74

Transaction ID : SB17.7754

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2.16

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15020164689

**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 154 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7755
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7755
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7784
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2.51
TOTAL This Period (last page this line number only)	

15020164690

**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 155 OF 181
	<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)
BELL FOR SENATE

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7785

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7786

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7787

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3.09

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

15020164691

**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 156 OF 181			
	<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. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7788

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7789

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.03

Transaction ID : SB17.7790

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3.09

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

15020164692

**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 157 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)		Date of Disbursement							
A. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y							
10	31	2014							
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period							
City San Francisco	State CA	Zip Code 94110	<table border="1"> <tr> <td>1.03</td> </tr> </table>	1.03					
1.03									
Purpose of Disbursement Credit card fee		Transaction ID : SB17.7791							
Candidate Name		Category/ Type							
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State:	District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
B. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y							
10	31	2014							
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period							
City San Francisco	State CA	Zip Code 94110	<table border="1"> <tr> <td>1.03</td> </tr> </table>	1.03					
1.03									
Purpose of Disbursement Credit card fee		Transaction ID : SB17.7792							
Candidate Name		Category/ Type							
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State:	District:								

Full Name (Last, First, Middle Initial)		Date of Disbursement							
C. Stripe		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y							
10	31	2014							
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period							
City San Francisco	State CA	Zip Code 94110	<table border="1"> <tr> <td>1.17</td> </tr> </table>	1.17					
1.17									
Purpose of Disbursement Credit card fee		Transaction ID : SB17.7867							
Candidate Name		Category/ Type							
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State:	District:								

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>3.23</td> </tr> </table>	3.23
3.23		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

15020164693

**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 158 OF 181	
	<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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y						
10	31	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1.32</td> </tr> </table> Transaction ID : SB17.7870	1.32					
1.32								
City San Francisco State CA Zip Code 94110	Purpose of Disbursement Credit card fee							
Candidate Name	Category/Type							
Office Sought: <input type="checkbox"/> House <input 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: District:								

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y						
10	31	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1.46</td> </tr> </table> Transaction ID : SB17.7876	1.46					
1.46								
City San Francisco State CA Zip Code 94110	Purpose of Disbursement Credit card fee							
Candidate Name	Category/Type							
Office Sought: <input type="checkbox"/> House <input 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: District:								

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>31</td> <td>2014</td> </tr> </table>	M M	D D	Y Y Y Y	10	31	2014
M M	D D	Y Y Y Y						
10	31	2014						
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1.75</td> </tr> </table> Transaction ID : SB17.7887	1.75					
1.75								
City San Francisco State CA Zip Code 94110	Purpose of Disbursement Credit card fee							
Candidate Name	Category/Type							
Office Sought: <input type="checkbox"/> House <input 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: District:								

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>4.53</td> </tr> </table>	4.53
4.53		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

15020164694

**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 159 OF 181			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7888

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7889

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7890

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5.25

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

15020164695

**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 160 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7891

Category/Type

Full Name (Last, First, Middle Initial)

B. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7892

Category/Type

Full Name (Last, First, Middle Initial)

c. Stripe

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
1.75

Transaction ID : SB17.7893

Category/Type

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

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

5.25

15020164696

**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 161 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7983
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7984
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7985
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional)	9.60
TOTAL This Period (last page this line number only)	

15020164697

**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 162 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7986
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7987
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7988
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional)	9.60
TOTAL This Period (last page this line number only)	

15020164698

**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 163 OF 181			
	<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. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
7.55

Transaction ID : SB17.8040

Category/Type

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
7.55

Transaction ID : SB17.8041

Category/Type

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2014

Amount of Each Disbursement this Period
7.55

Transaction ID : SB17.8042

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 22.65

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

15020164699

**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 164 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8043
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 10 / 31 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8044
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.45	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7725
Purpose of Disbursement Credit card fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

SUBTOTAL of Disbursements This Page (optional).....	15.55
TOTAL This Period (last page this line number only).....	

15020164700

**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. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7751
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7752
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.88 Transaction ID : SB17.7768
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:

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

2.36

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

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15020164701

**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 166 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.88 Transaction ID : SB17.7769
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7778
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7779
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	2.94
TOTAL This Period (last page this line number only).....	

15020164702

**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 167 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7780
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7781
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7782
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	3.09
TOTAL This Period (last page this line number only).....	

15020164703

**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 168 OF 181	
	<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)
BELL FOR SENATE

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2014

Amount of Each Disbursement this Period: 1.03

Transaction ID : SB17.7783

B. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7885

c. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18th St
STE 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2014

Amount of Each Disbursement this Period: 1.75

Transaction ID : SB17.7886

SUBTOTAL of Disbursements This Page (optional)..... 4.53

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

15020164704

**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 169 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7979
Purpose of Disbursement Credit card fee	Category/Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7980
Purpose of Disbursement Credit card fee	Category/Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7981
Purpose of Disbursement Credit card fee	Category/Type		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	9.60
TOTAL This Period (last page this line number only).....	

15020164705

**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 170 OF 181			
	<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. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.7982
Purpose of Disbursement Credit card fee	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8039
Purpose of Disbursement Credit card fee	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 29.30	
City San Francisco	State CA	Zip Code 94110	Transaction ID : SB17.8067
Purpose of Disbursement Credit card fee	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input 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: District:			

SUBTOTAL of Disbursements This Page (optional).....	40.05
TOTAL This Period (last page this line number only).....	

15020164706

**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 171 OF 181	
	<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. Stripe		Date of Disbursement MM / DD / YYYY 11 / 02 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7777
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 02 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7884
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 02 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.8038
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional)	10.33
TOTAL This Period (last page this line number only)	

15020164707

**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 172 OF 181
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.59 Transaction ID : SB17.7732
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 0.74 Transaction ID : SB17.7750
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7774
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2.36
TOTAL This Period (last page this line number only).....	

15020164708

**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 173 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7775
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.7776
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7881
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3.81
TOTAL This Period (last page this line number only).....	

15020164709

**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 174 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7882
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7883
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7977
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit card fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	6.70
TOTAL This Period (last page this line number only).....	

15020164710

**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 175 OF 181	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 3.20 Transaction ID : SB17.7978
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.8037
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) C. Stripe		Date of Disbursement MM / DD / YYYY 11 / 05 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7880
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

SUBTOTAL of Disbursements This Page (optional).....	12.50
TOTAL This Period (last page this line number only).....	

15020164711

**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 176 OF 181
	<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. Stripe		Date of Disbursement MM / DD / YYYY 11 / 08 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.7879
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 11 / 13 / 2014
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 6.10 Transaction ID : SB17.8034
City San Francisco	State CA	
Purpose of Disbursement Credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input 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:	District:	

Full Name (Last, First, Middle Initial) c. TCD Compliance, LLC		Date of Disbursement MM / DD / YYYY 10 / 18 / 2014
Mailing Address 3365 Cherry Lane Unit D		Amount of Each Disbursement this Period 630.00 Transaction ID : SB17.6982
City Woodbury	State MN	
Purpose of Disbursement Accounting and Reporting		Category/ Type 001
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).....	637.85
TOTAL This Period (last page this line number only).....	

15020164712

**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. TCD Compliance, LLC

Mailing Address 3365 Cherry Lane
Unit D

City Woodbury State MN Zip Code 55129

Purpose of Disbursement
Accounting and Reporting

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Amount of Each Disbursement this Period

490.00

Transaction ID : SB17.6978

Full Name (Last, First, Middle Initial)

B. TCD Compliance, LLC

Mailing Address 3365 Cherry Lane
Unit D

City Woodbury State MN Zip Code 55129

Purpose of Disbursement
Postage

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Amount of Each Disbursement this Period

35.20

Transaction ID : SB17.6980

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 360 Broad Ave

City Princeton State NJ Zip Code 07605

Purpose of Disbursement
Postage

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2014

Amount of Each Disbursement this Period

35.20

Transaction ID : SB17.6980.0

[MEMO ITEM]

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

525.20

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

15020164715

**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 178 OF 181			
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. U.S. Treasury Department		Date of Disbursement
Mailing Address 1500 Pennsylvania Ave. NW		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20220
Purpose of Disbursement Tax payment	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1930.72"/>
Candidate Name	Category/ Type	Transaction ID : SB17.8116
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) B. U.S. Treasury Department		Date of Disbursement
Mailing Address 1500 Pennsylvania Ave. NW		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20220
Purpose of Disbursement Tax payment	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3052.00"/>
Candidate Name	Category/ Type	Transaction ID : SB17.8122
Office Sought: <input type="checkbox"/> House <input 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: District:		

Full Name (Last, First, Middle Initial) C. U.S. Treasury Department		Date of Disbursement
Mailing Address 1500 Pennsylvania Ave. NW		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20220
Purpose of Disbursement Tax payment	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1930.72"/>
Candidate Name	Category/ Type	Transaction ID : SB17.8117
Office Sought: <input type="checkbox"/> House <input 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: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6913.44"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

15020164714

**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 179 OF 181
	<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. USPS

Full Name (Last, First, Middle Initial)
Mailing Address 360 Broad Ave

City Princeton State NJ Zip Code 07605

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period
949.34

Transaction ID : SB17.8098

Category/Type

B. Verizon

Full Name (Last, First, Middle Initial)
Mailing Address 540 Broad St

City Newark State NJ Zip Code 07102

Purpose of Disbursement Internet access

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
10 / 21 / 2014

Amount of Each Disbursement this Period
331.34

Transaction ID : SB17.8091

Category/Type

C. Vertical Response

Full Name (Last, First, Middle Initial)
Mailing Address 50 Beale St
Floor 10

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Email communications

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY
10 / 22 / 2014

Amount of Each Disbursement this Period
128.00

Transaction ID : SB17.8084

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 949.34

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

15020164715

**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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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

Full Name (Last, First, Middle Initial)

A. Vertical Response

Mailing Address 50 Beale St
Floor 10

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Email communications

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /
11 / 24 / 2014

Amount of Each Disbursement this Period

128.00

Transaction ID : SB17.8085

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Bank fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /
10 / 31 / 2014

Amount of Each Disbursement this Period

56.00

Transaction ID : SB17.8076

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

184.00

223884.88

15020164716

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 <input type="text" value="14993.33"/>		Transaction ID : SD10.5743	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14993.33"/>	

B. 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 <input type="text" value="566.46"/>		Transaction ID : SD10.6975	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="566.46"/>	

C. 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 <input type="text" value="0.00"/>		Transaction ID : SD10.8167	
Amount Incurred This Period <input type="text" value="7617.84"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7617.84"/>	

1) SUBTOTALS This Period This Page (optional) ..	<input type="text" value="23177.63"/>
2) TOTALS This Period (last page this line number) ...	<input type="text" value="23177.63"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="23177.63"/>

15020164717

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 31

Check if different than previously reported. (ACC)

PALISADES PARK

NJ

07650

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

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/DD/YYYY 11/25/2014

through

MM/DD/YYYY 12/31/2014

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

Type or Print Name of Treasurer Alfred A Angelo

Signature of Treasurer

[Handwritten Signature]

Date

MM/DD/YYYY 04/28/2014

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)

15020164718

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 12

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
11	

 /

D	D
25	

 /

Y	Y	Y	Y
2014			

 To:

M	M
12	

 /

D	D
31	

 /

Y	Y	Y	Y
2014			

	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)) ..	350.00	563122.38
(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)) ...	350.00	562922.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	5375.05	512834.93
(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)) ...	5375.05	512834.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	2182.74	
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) ..	22027.63	

For further information contact:

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

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

15020164719

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From: M M M / D D D / Y Y Y Y Y
11 / 25 / 2014 To: M M M / D D D / Y Y Y Y Y
12 / 31 / 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) ...

250.00

415224.93

(ii) Unitemized

100.00

79172.45

(iii) TOTAL of contributions from individuals

350.00

494397.38

(b) Political Party Committees...

0.00

2000.00

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

0.00

66725.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

350.00

563122.38

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

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

0.00

30000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

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

0.00

30000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.13

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)...

350.00

593122.51

15020164720

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	5375.05	512834.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	500.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	30000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	30000.00
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	1636.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5875.05	544671.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	7707.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	350.00
25. SUBTOTAL (add Line 23 and Line 24)...	8057.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	5875.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2182.74

15020164721

**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 12
(check only one)

<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)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
David Gosselin

Mailing Address 62 Jordan Rd

City Willimantic State CT Zip Code 06226

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

Name of Employer Self Occupation Insurance Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
12 / 15 / 2014

Transaction ID : SA11A1.8170

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date
250.00

B. 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
MM / DD / YYYY

Amount of Each Receipt this Period

Election Cycle-to-Date

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
MM / DD / YYYY

Amount of Each Receipt this Period

Election Cycle-to-Date

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

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

250.00

250.00

15020164722

**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 12	
	<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Julia Bell		Date of Disbursement MM / DD / YYYY 11 / 26 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 406.44 Transaction ID : SB17.8175
City Leonia	State NJ	
Zip Code 07605	Purpose of Disbursement Expense Reimbursement	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input checked="" 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. Julia Bell		Date of Disbursement MM / DD / YYYY 12 / 01 / 2014
Mailing Address 132 Christie St		Amount of Each Disbursement this Period 271.60 Transaction ID : SB17.8175.1
City Leonia	State NJ	
Zip Code 07605	Purpose of Disbursement Mileage	Category/ Type 001
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	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement MM / DD / YYYY 12 / 01 / 2014
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 566.46 Transaction ID : SB17.8193
City Charlotte	State NC	
Zip Code 28272	Purpose of Disbursement Credit Card Payment	Category/ Type 009
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).....	972.90
TOTAL This Period (last page this line number only).....	

15020164725

**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 7 OF 12			
	<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. Capital One

Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement
Credit Card Payment

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
12 / 01 / 2014

Amount of Each Disbursement this Period
433.54

Transaction ID : SB17.8194

Category/Type
009

Full Name (Last, First, Middle Initial)

B. Gia Coluccio

Mailing Address 310 Prospect Ave
Apt. 331

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Campaign Consulting

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
12 / 01 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.8186

Category/Type
001

Full Name (Last, First, Middle Initial)

C. Constant Contact

Mailing Address 17 Battery Pl

City New York State NY Zip Code 10004

Purpose of Disbursement
E-Mail Marketing

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
12 / 03 / 2014

Amount of Each Disbursement this Period
180.00

Transaction ID : SB17.8180

Category/Type
001

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

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

3613.54

15020164724

**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 8 OF 12

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Ampitheatre Pkwy

City Mountain View State CA Zip Code 94041

Purpose of Disbursement
E-Mail Services

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
12	05	2014

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.8177

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Payroll

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
11	28	2014

Amount of Each Disbursement this Period

39.95

Transaction ID : SB17.8173

Full Name (Last, First, Middle Initial)

C. Intuit

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Accounting

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President
State: NJ District: 00

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement

M M	D D	Y Y Y Y
11	28	2014

Amount of Each Disbursement this Period

47.70

Transaction ID : SB17.8174

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

157.65

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

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**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 12			
	<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)
BELL FOR SENATE

A. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Accounting

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 12/03/2014

Amount of Each Disbursement this Period: 62.95

Transaction ID : SB17.8181

Category/Type: 001

B. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Payroll

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 12/29/2014

Amount of Each Disbursement this Period: 39.95

Transaction ID : SB17.8182

Category/Type: 001

C. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Accounting

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 12/29/2014

Amount of Each Disbursement this Period: 44.70

Transaction ID : SB17.8183

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 147.60

TOTAL This Period (last page this line number only)

15020164726

**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 10 OF 12			
	<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)
BELL FOR SENATE

A. TCD Compliance, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3365 Cherry Lane
Unit D

City Woodbury State MN Zip Code 55129

Purpose of Disbursement
Accounting and Reporting

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
12 / 22 / 2014

Amount of Each Disbursement this Period
200.00

Transaction ID : SB17.8176

Category/
Type
001

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

Category/
Type

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

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... 200.00

TOTAL This Period (last page this line number only)..... 5091.69

15020164727

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 12			
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. PEZZULLO FOR SENATOR		Date of Disbursement
Mailing Address PO BOX 7043		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City FREEHOLD	State NJ	Zip Code 07728
Purpose of Disbursement Campaign Contribution	<input type="text" value="011"/>	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Candidate Name BELL FOR SENATE	Category/ Type	Transaction ID : SB18.8184
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.		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/>
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period <input type="text"/>
Candidate Name	Category/ Type	
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).....	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="500.00"/>

15020164726

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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	Transaction ID : SD10.5743	
<input type="text" value="14993.33"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="433.54"/>	<input type="text" value="14559.79"/>

B. 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	Transaction ID : SD10.6975	
<input type="text" value="566.46"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="566.46"/>	<input type="text" value="0.00"/>

C. 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	Transaction ID : SD10.8167	
<input type="text" value="7617.84"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="150.00"/>	<input type="text" value="7467.84"/>

1) SUBTOTALS This Period This Page (optional) ..	<input type="text" value="22027.63"/>
2) TOTALS This Period (last page this line number) ..	<input type="text" value="22027.63"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="22027.63"/>

15020164729

FROM:

Bell for Senate

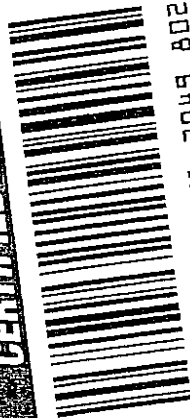
P.O. Box 31

Palisades Park, NJ 07650

7034 2870 0001 2049 8029

PLACE STICKER ON TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS FOLD ALONG DOTTED LINE

CERTIFIED MAIL



7034 2870 0001 2049 8029

BA 02

15020164730

Bubble Mailer

15020164731

for Sen side

Box 31

sliscales Park, NT 07650

U.S. POSTAGE
PAID
ARLINGTON, VA
22201
APR 28, 15
AMOUNT
\$12.25
00708405-08



20013



1024

TO:

Office of Public Records

P.O. Box 77578

Washington, D.C. 20013-7757



UNDELIVERED

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 4-28-15
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

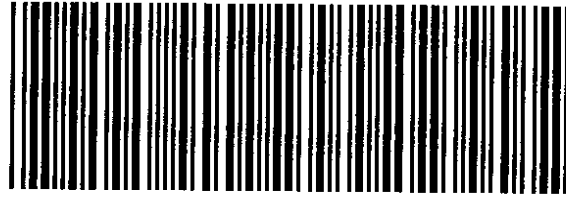
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

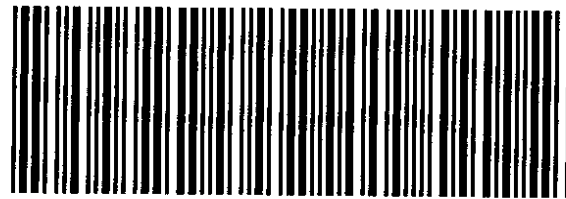
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 4-30-15

15020164732



SEN PATCH



SEN PATCH

15020164733