

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

Elaine Hays for Congress

ADDRESS (number and street)

PO Box 19476

Check if different than previously reported. (ACC)

Amarillo

TX

79114

2. FEC IDENTIFICATION NUMBER ▼

C C00544452

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TX

13

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Deborah Turley

Signature of Treasurer Deborah Turley

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Elaine Hays for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y 09 / 30 / 2013

	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))....	31930.20	34289.19
(b) Total Contribution Refunds (from Line 20(d))	5000.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26930.20	29289.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20323.91	22682.90
(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)).....	20323.91	22682.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6606.29	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Elaine Hays for Congress

Report Covering the Period: From: / / To: / /

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).....	24060.00	24060.00
(ii) Unitemized.....	1245.00	1445.00
(iii) TOTAL of contributions from individuals ▶	25305.00	25505.00
(b) Political Party Committees.....	500.00	500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	6125.20	8284.19
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	31930.20	34289.19
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	31930.20	34289.19

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20323.91	22682.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(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)).....	5000.00	5000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	25323.91	27682.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31930.20
25. SUBTOTAL (add Line 23 and Line 24).....	31930.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25323.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6606.29

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
MICHELLE BAUMAN

Mailing Address **2610 S. HARRISON**

City **AMARILLO** State **TX** Zip Code **79109-2536**

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

Name of Employer **SELF** Occupation **ARTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2013

Transaction ID : SA11.14

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BART BOREN

Mailing Address **2001 LISTER**

City **BORGER** State **TX** Zip Code **79007-6130**

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

Name of Employer **SELF EMPLOYED** Occupation **GEOLOGIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2013

Transaction ID : SA11.30

Amount of Each Receipt this Period
1250.00
 CONTRIBUTION

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

Mailing Address **2001 LISTER**

City **BORGER** State **TX** Zip Code **79007-6130**

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

Name of Employer **SELF EMPLOYED** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2013

Transaction ID : SA11.29

Amount of Each Receipt this Period
1250.00
 CONTRIBUTION

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

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

3500.00

**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 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM V ESLER

Mailing Address 2801 S BONHAM ST

City State Zip Code
AMARILLO TX 79109-3423

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

Name of Employer Occupation
TEXAS ONCOLOGY PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2013

Transaction ID : SA11.9

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD A. FENOGLIO

Mailing Address 146 ALAMO RD

City State Zip Code
MONTAGUE TX 76251-1118

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

Name of Employer Occupation
CUSTOM WATER COMPANY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2013

Transaction ID : SA11.35

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

Mailing Address 801 S FILLMORE STE 460H

City State Zip Code
AMARILLO TX 79101-3521

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

Name of Employer Occupation
SELF EMPLOYED RANCHING/INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2013

Transaction ID : SA11.20

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

3750.00

**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 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
TONYA FLETCHER

Mailing Address 5195 CO RD 1

City State Zip Code
CLARENDON TX 79226-4410

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

Name of Employer Occupation
SELF EMPLOYED RANCHER/LANDLORD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2013

Transaction ID : SA11.23

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOYD GIST

Mailing Address 2403 SW 26TH

City State Zip Code
AMARILLO TX 79109-1901

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

Name of Employer Occupation
A & S GENERAL CONTRACTORS PROJECT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2013

Transaction ID : SA11.5

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address #5 HOGAN DR.

City State Zip Code
AMARILLO TX 79124-1712

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

Name of Employer Occupation
DISCO, INC. DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2013

Transaction ID : SA11.45

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1500.00

**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 8 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL HANING

Mailing Address 4308 ARP PLACE

City State Zip Code
AMARILLO TX 79109-5670

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

Name of Employer Occupation
DISCO, INC. MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2013

Transaction ID : SA11.37

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NORMA HART

Mailing Address P.O. BOX 1148

City State Zip Code
GAINESVILLE TX 76241-1148

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

Name of Employer Occupation
SELF - HART II AUSTRALIAN SHEPHERDS DOG BREEDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2013

Transaction ID : SA11.34

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF EMPLOYED CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2013

Transaction ID : SA11A.59

Amount of Each Receipt this Period
5000.00

CONTRIBUTION - TO BE REFUNDED

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

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

6500.00

**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 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
LINDA HINDERS

Mailing Address 10 BUNKER PASS

City State Zip Code
CANYON TX 79015-1808

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

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2013

Transaction ID : SA11.16

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LARRY LATHAM

Mailing Address 9101 REDWING ROAD

City State Zip Code
AMARILLO TX 79119-2588

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

Name of Employer Occupation
SELF EMPLOYED INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2013

Transaction ID : SA11.21

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

Mailing Address 3717 LANGTRY

City State Zip Code
AMARILLO TX 79109-3925

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

Name of Employer Occupation
SELF EMPLOYED OIL & GAS PRODUCTION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1060.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2013

Transaction ID : SA11.43

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4500.00

**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 10 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
JAMES MCCOWN

Mailing Address 3717 LANGTRY

City State Zip Code
AMARILLO TX 79109-3925

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

Name of Employer Occupation
SELF EMPLOYED OIL & GAS PRODUCTION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1060.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2013

Transaction ID : SA11.44

Amount of Each Receipt this Period
60.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GARY ROGERS

Mailing Address 5916 AMBERWOOD LN

City State Zip Code
AMARILLO TX 79106-5028

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

Name of Employer Occupation
NALCO CO. & GARY ROGERS HOMES CHEMICAL CONSULTANT, HOME BUILDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2013

Transaction ID : SA11.2

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address 8010 S COULTER

City State Zip Code
AMARILLO TX 79119-7324

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

Name of Employer Occupation
COX FUNERAL HOME DIRECTOR OF AFTER CARE & FAMILY SER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2013

Transaction ID : SA11.31

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1310.00

**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 11 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
SHARON SELL

Mailing Address **7801 CLEARMEADOW**

City **AMARILLO** State **TX** Zip Code **79119-6512**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 27 / 2013

Transaction ID : SA11.39

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JUNE TAYLOR

Mailing Address **2125 BRINKER RD
WILLOW BEND, APT 122**

City **DENTON** State **TX** Zip Code **76208-6997**

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
 M M / D D / Y Y Y Y
08 / 15 / 2013

Transaction ID : SA11.22

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address **3916 DORIS DRIVE**

City **AMARILLO** State **TX** Zip Code **79109-5507**

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

Name of Employer **BROWN, GRAHAM & COMPANY, P.C.** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2013

Transaction ID : SA11.19

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

2500.00

**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 12 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
DAWN WELLS

Mailing Address 7309 PARK RIDGE DR

City State Zip Code
AMARILLO TX 79119-6421

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

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2013

Transaction ID : SA11.12

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

24060.00

**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 23
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
CHILDRESS COUNTY REPUBLICAN PARTY

Mailing Address P.O. BOX 601

City State Zip Code
CHILDRESS TX 79201-0601

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

Name of Employer Occupation

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 Y Y
 08 / 06 / 2013

Transaction ID : SA11.17

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

500.00

**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 14 OF 23
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
M M / D D / Y Y Y Y
07 24 2013

Transaction ID : SA11D.126

Amount of Each Receipt this Period
5000.00

LOAN FROM CANDIDATE

B. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
M M / D D / Y Y Y Y
07 02 2013

Transaction ID : SA11D.127

Amount of Each Receipt this Period
63.70

IN KIND CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
M M / D D / Y Y Y Y
07 02 2013

Transaction ID : SA11D.128

Amount of Each Receipt this Period
259.40

IN KIND CONTRIBUTION

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

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

5323.10

**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 15 OF 23
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2013

Transaction ID : SA11D.129

Amount of Each Receipt this Period
 318.00

IN-KIND CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2013

Transaction ID : SA11D.60

Amount of Each Receipt this Period
 275.72

IN KIND CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2013

Transaction ID : SA11D.68

Amount of Each Receipt this Period
 18.68

IN KIND CONTRIBUTION

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

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

612.40

**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 16 OF 23
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Elaine Hays for Congress

A. Full Name (Last, First, Middle Initial)
JULIA ELAINE HAYS

Mailing Address 1520 S. LAMAR

City State Zip Code
AMARILLO TX 79102

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8284.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 30 2013

Transaction ID : SA11D.69

Amount of Each Receipt this Period
 189.70

IN KIND CONTRIBUTION

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
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

189.70

6125.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 23	
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. GARY JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2013
Mailing Address P.O. BOX 428		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.I87
City GRAY	State GA	
Zip Code 31032	Purpose of Disbursement INTERPRETING SVC	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. GARY JOHNSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2013
Mailing Address P.O. BOX 428		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.I94
City GRAY	State GA	
Zip Code 31032	Purpose of Disbursement INTERPRETING SVC	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KEN SCARBOROUGH		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 3419 WESTMINSTER AVENUE, #184		Amount of Each Disbursement this Period 2640.00 Transaction ID : SB17.I86
City UNIVERSITY PARK	State TX	
Zip Code 75205	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4640.00
TOTAL This Period (last page this line number only).....	

**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 18 OF 23			
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. AMBASSADOR HOTEL		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 3100 W IH40		Amount of Each Disbursement this Period 318.00 Transaction ID : SB17.I40
City AMARILLO	State TX	
Zip Code 79102	Purpose of Disbursement FACILITY RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMBASSADOR HOTEL		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2013
Mailing Address 3100 W IH40		Amount of Each Disbursement this Period 391.50 Transaction ID : SB17.I83
City AMARILLO	State TX	
Zip Code 79102	Purpose of Disbursement TRAVEL	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BEARSE & COMPANY, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2013
Mailing Address 823 CONGRESS AVENUE, SUITE 1300		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.I90
City AUSTIN	State TX	
Zip Code 78701	Purpose of Disbursement MEDIA	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3709.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 23	
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. BETA MARKETING SOLUTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address 693 N BARTON		Amount of Each Disbursement this Period 730.00 Transaction ID : SB17.I84
City STEPHENVILLE State TX Zip Code 76401	Purpose of Disbursement MEDIA Category/Type 004	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address 1593 SPRING HILL ROAD STE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I108
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement SUBSCRIPTIONS Category/Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address 1593 SPRING HILL ROAD STE 400		Amount of Each Disbursement this Period 798.00 Transaction ID : SB17.I134
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement SUBSCRIPTIONS Category/Type 001	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2326.00
TOTAL This Period (last page this line number only).....	

**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 20 OF 23			
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 1593 SPRING HILL ROAD STE 400		Amount of Each Disbursement this Period 798.00
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement SUBSCRIPTIONS	Category/Type 001	Transaction ID : SB17.I77
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COURTYARD BY MARRIOTT		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address 1533 CLARENDON BOULEVARD		Amount of Each Disbursement this Period 1055.58
City ARLINGTON	State VA Zip Code 22209	
Purpose of Disbursement TRAVEL	Category/Type 002	Transaction ID : SB17.I105
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 100 CENTRAL FREEWAY		Amount of Each Disbursement this Period 259.40
City WICHITA FALLS	State TX Zip Code 76306	
Purpose of Disbursement TRAVEL	Category/Type 002	Transaction ID : SB17.I42
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2112.98
TOTAL This Period (last page this line number only).....	

**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 21 OF 23		
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. RT INVESTMENTS/PLAZA WEST		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2013
Mailing Address P.O. BOX 31832		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.I92
City AMARILLO	State TX	
Zip Code 79120	Purpose of Disbursement FACILITY RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013
Mailing Address PO BOX 36647-1CR		Amount of Each Disbursement this Period 529.40 Transaction ID : SB17.I130
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement TRAVEL	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2013
Mailing Address PO BOX 36647-1CR		Amount of Each Disbursement this Period 342.60 Transaction ID : SB17.I81
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement TRAVEL	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1472.00
TOTAL This Period (last page this line number only).....	

**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 22 OF 23	
	<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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial)
A. SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY ROAD, SUITE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement PRINTING Category/Type 006

Candidate Name

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

State: District:

Date of Disbursement 09 / 07 / 2013

Amount of Each Disbursement this Period 1660.00

Transaction ID : SB17.I88

Full Name (Last, First, Middle Initial)
B. SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY ROAD, SUITE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement PRINTING Category/Type 006

Candidate Name

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

State: District:

Date of Disbursement 09 / 07 / 2013

Amount of Each Disbursement this Period 625.00

Transaction ID : SB17.I89

Full Name (Last, First, Middle Initial)
C. SPECTRUM MARKETING COMPANIES

Mailing Address 95 EDDY ROAD, SUITE 101

City MANCHESTER State NH Zip Code 03102

Purpose of Disbursement MARKETING MATERIALS Category/Type 006

Candidate Name

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

State: District:

Date of Disbursement 09 / 18 / 2013

Amount of Each Disbursement this Period 776.00

Transaction ID : SB17.I93

SUBTOTAL of Disbursements This Page (optional)..... 3061.00

TOTAL This Period (last page this line number only)..... 17321.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 23			
	<input type="checkbox"/> 17 <input checked="" 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)
Elaine Hays for Congress

Full Name (Last, First, Middle Initial) A. TRACY HAYS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013
Mailing Address 1520 S. LAMAR		Amount of Each Disbursement this Period 5000.00
City AMARILLO	State TX	
Purpose of Disbursement REFUND OF CONTRIBUTION	Zip Code 79102	Transaction ID : SB20A.I51
Candidate Name	Category/ Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00