



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Kelly PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		118411.3
(b) Cash on Hand at Beginning of Reporting Period.....	118912.31	
(c) Total Receipts (from Line 19) .....	66505	206053.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	185417.31	324464.96
7. Total Disbursements (from Line 31).....	39480.23	178527.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	145937.08	145937.08
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	3362.23	

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

**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 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Kelly PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	10500
(ii) Unitemized .....	5	5
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5	10505
(b) Political Party Committees .....	0	1048.66
(c) Other Political Committees (such as PACs).....	66500	194500
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	66505	206053.66
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	66505	206053.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	66505	206053.66

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	2580.23	71427.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2580.23	71427.88
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500	92500
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	4400	14600
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	39480.23	178527.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39480.23	178527.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	66505	206053.66
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	66505	206053.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2580.23	71427.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2580.23	71427.88

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)  
**A. Arent Fox LLP PAC (AFPAC)**

Mailing Address 1717 K Street NW

City Washington State DC Zip Code 20006-5343

FEC ID number of contributing federal political committee. **C C00241380**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **06 / 12 / 2014**  
**Transaction ID : 883-1009-c**

Amount of Each Receipt this Period **1000**

Contribution

Full Name (Last, First, Middle Initial)  
**B. Association of American Railroads PAC (RAILPAC)**

Mailing Address 425 3rd Street SW Suite 1000

City Washington State DC Zip Code 20024-3228

FEC ID number of contributing federal political committee. **C C00280743**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **06 / 20 / 2014**  
**Transaction ID : 480-1023-c**

Amount of Each Receipt this Period **1000**

Contribution

Full Name (Last, First, Middle Initial)  
**C. Automotive Free International Trade PAC (AFIT PAC)**

Mailing Address 1625 Prince Street Suite 225

City Alexandria State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C C00250399**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000**

Date of Receipt **06 / 30 / 2014**  
**Transaction ID : 888-1035-c**

Amount of Each Receipt this Period **5000**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **7000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)  
**A. BNSF Railway Company PAC (BNSF RAILPAC)**

Mailing Address PO Box 961039

City Fort Worth State TX Zip Code 76161-0039

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
06 / 20 / 2014  
**Transaction ID : 491-1024-c**

Amount of Each Receipt this Period  
5000

Contribution

Full Name (Last, First, Middle Initial)  
**B. Comcast Corporation & NBCUniversal PAC - Federal**

Mailing Address 1701 John F Kennedy Boulevard  
Floor 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
06 / 30 / 2014  
**Transaction ID : 287-1038-c**

Amount of Each Receipt this Period  
1000

Contribution

Full Name (Last, First, Middle Initial)  
**C. CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Avenue NW  
Suite 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
06 / 20 / 2014  
**Transaction ID : 463-1026-c**

Amount of Each Receipt this Period  
5000

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

**A. Elbit Systems of America LLC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4700 Marine Creek Parkway  
 City Fort Worth State TX Zip Code 76179-3505  
 FEC ID number of contributing federal political committee. **C** C00437566  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2014  
**Transaction ID : 846-1022-c**  
 Amount of Each Receipt this Period  
 1000  
 Contribution

**B. Electrical Contractors PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Bethesda Metro Center Suite 1100  
 City Bethesda State MD Zip Code 20814-6302  
 FEC ID number of contributing federal political committee. **C** C00113811  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : 825-1014-c**  
 Amount of Each Receipt this Period  
 1500  
 Contribution

**C. Electrical Contractors PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Bethesda Metro Center Suite 1100  
 City Bethesda State MD Zip Code 20814-6302  
 FEC ID number of contributing federal political committee. **C** C00113811  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : 825-1015-c**  
 Amount of Each Receipt this Period  
 1000  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)  
**A. Huntington Ingalls Industries, Inc. PAC (SHIPAC)**

Mailing Address 300 M Street SE  
Suite 350

City Washington State DC Zip Code 20003-3436

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000

Date of Receipt: 06 / 12 / 2014  
**Transaction ID : 430-1010-c**

Amount of Each Receipt this Period: 1000

Contribution

Full Name (Last, First, Middle Initial)  
**B. Independent Community Bankers of America PAC**

Mailing Address 1615 L Street NW  
Suite 900

City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500

Date of Receipt: 06 / 30 / 2014  
**Transaction ID : 342-1037-c**

Amount of Each Receipt this Period: 2500

Contribution

Full Name (Last, First, Middle Initial)  
**C. International Franchise Association Franchising PAC**

Mailing Address 1501 K Street NW

City Washington State DC Zip Code 20005-1401

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000

Date of Receipt: 06 / 30 / 2014  
**Transaction ID : 426-1041-c**

Amount of Each Receipt this Period: 1000

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

**A. JPMorgan Chase & Co PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 S Dearborn Street  
 # IL1-0520  
 City Chicago State IL Zip Code 60603-2300  
 FEC ID number of contributing federal political committee. **C** C00128512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : 824-1034-c**  
 Amount of Each Receipt this Period  
 5000  
 Contribution

**B. Lockheed Martin Corp. Employee's PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 Crystal Drive  
 Suite 100  
 City Arlington State VA Zip Code 22202-3706  
 FEC ID number of contributing federal political committee. **C** C00303024  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : 386-1027-c**  
 Amount of Each Receipt this Period  
 2500  
 Contribution

**C. Massachusetts Mutual Life Insurance Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 State Street  
 City Springfield State MA Zip Code 01111-0001  
 FEC ID number of contributing federal political committee. **C** C00118943  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : 889-1040-c**  
 Amount of Each Receipt this Period  
 2500  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

**A. McGraw Hill Financial Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1221 Avenue Of The Americas  
Floor 48

City New York State NY Zip Code 10020-1001

FEC ID number of contributing federal political committee. **C** C00494682

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
06 / 30 / 2014  
**Transaction ID : 847-1039-c**

Amount of Each Receipt this Period  
1500

Contribution

**B. Microsoft Corporation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 16011 NE 36th Way  
# 97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
06 / 12 / 2014  
**Transaction ID : 259-1013-c**

Amount of Each Receipt this Period  
2500

Contribution

**c. Mortgage Bankers Association PAC (MORPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1717 Rhode Island Avenue NW  
Suite 400

City Washington State DC Zip Code 20036-3023

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000

Date of Receipt  
06 / 12 / 2014  
**Transaction ID : 501-1011-c**

Amount of Each Receipt this Period  
1500

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)  
**A. National Association of Real Estate Investment Trusts Inc PAC**  
Mailing Address 1875 I Street NW  
Suite 600  
City Washington State DC Zip Code 20006-5413  
FEC ID number of contributing federal political committee. **C C00303339**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**1000**

Date of Receipt  
**06 / 02 / 2014**  
**Transaction ID : 377-1000-c**  
Amount of Each Receipt this Period  
**1000**  
Contribution

Full Name (Last, First, Middle Initial)  
**B. National Beer Wholesalers Association PAC**  
Mailing Address 1101 King Street  
Suite 600  
City Alexandria State VA Zip Code 22314-2965  
FEC ID number of contributing federal political committee. **C C00144766**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**2500**

Date of Receipt  
**06 / 30 / 2014**  
**Transaction ID : 769-1036-c**  
Amount of Each Receipt this Period  
**2500**  
Contribution

Full Name (Last, First, Middle Initial)  
**C. Norfolk Southern Corp. Good Government Fund**  
Mailing Address 1 Constitution Avenue NE  
City Washington State DC Zip Code 20002-5618  
FEC ID number of contributing federal political committee. **C C00009282**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**2500**

Date of Receipt  
**06 / 20 / 2014**  
**Transaction ID : 478-1021-c**  
Amount of Each Receipt this Period  
**2500**  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **6000.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial) <b>A. Raytheon Company PAC</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 <b>Transaction ID : 347-1033-c</b>
Mailing Address 1100 Wilson Boulevard Suite 1500		Amount of Each Receipt this Period 5000
City Arlington	State VA	Zip Code 22209-3900
FEC ID number of contributing federal political committee. <b>C C00097568</b>		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

Full Name (Last, First, Middle Initial) <b>B. Time Warner Cable Federal PAC</b>		Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : 856-1012-c</b>
Mailing Address 901 F Street NW Suite 800		Amount of Each Receipt this Period 4000
City Washington	State DC	Zip Code 20004-1477
FEC ID number of contributing federal political committee. <b>C C00358663</b>		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

Full Name (Last, First, Middle Initial) <b>c. Union Pacific Corp. Fund for Effective Governmet</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2014 <b>Transaction ID : 303-1025-c</b>
Mailing Address 700 13th Street NW Suite 350		Amount of Each Receipt this Period 5000
City Washington	State DC	Zip Code 20005-3960
FEC ID number of contributing federal political committee. <b>C C00010470</b>		Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 21  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)  
**A. Wine and Spirits Wholesalers of America Inc. PAC**

Mailing Address 805 15th Street NW  
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2014

**Transaction ID : 300-1028-c**

Amount of Each Receipt this Period  
5000

Contribution

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	66500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
PAC Food & Beverage

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-892-1047-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Koch & Hoos, LLC**

Mailing Address 901 N Washington Street  
Suite 700

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement  
PAC Accounting/Compliance Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-500-995-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens For Cochran**

Mailing Address PO Box 7183

City State Zip Code  
Tupelo MS 38802-7183

Purpose of Disbursement  
Contribution

011

Candidate Name

**Thad Cochran**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2014

**Transaction ID : SB23-812-1001-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**B. Citizens For Cochran**

Mailing Address PO Box 7183

City State Zip Code  
Tupelo MS 38802-7183

Purpose of Disbursement  
Contribution

011

Candidate Name

**Thad Cochran**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Runoff 2014

State: MS District:

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2014

**Transaction ID : SB23-812-1002-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**C. Dr. Monica Wehby for US Senate**

Mailing Address PO Box 3375

City State Zip Code  
Portland OR 97208-3375

Purpose of Disbursement  
Contribution

011

Candidate Name

**Monica Wehby**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : SB23-814-1020-e**

Amount of Each Disbursement this Period

5000

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)

**A. Joni Ernst for US Senate Inc.**

Mailing Address PO Box 93441

City Des Moines State IA Zip Code 50393-3441

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joni K. Ernst**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

**Transaction ID : SB23-871-1018-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. New Hampshire For Scott Brown**

Mailing Address PO Box 600

City Rye State NH Zip Code 03870-0600

Purpose of Disbursement  
Contribution

011

Candidate Name

**Scott P Brown**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	4

**Transaction ID : SB23-881-1005-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Steve Daines For Montana**

Mailing Address PO Box 1598

City Helena State MT Zip Code 59624-1598

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steven Daines**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

**Transaction ID : SB23-818-1019-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)

**A. Committee To Elect House Republicans**

Mailing Address 75 S Main Street  
Unit 7 Box 159

City Concord State NH Zip Code 03301-4865

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

012  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2014

Transaction ID : SB29-882-1006-e

Amount of Each Disbursement this Period

150

Full Name (Last, First, Middle Initial)

**B. Committee To Elect House Republicans**

Mailing Address 75 S Main Street  
Unit 7 Box 159

City Concord State NH Zip Code 03301-4865

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

012  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2014

Transaction ID : SB29-882-1016-e

Amount of Each Disbursement this Period

2350

Full Name (Last, First, Middle Initial)

**C. CWSG, Inc.**

Mailing Address 1514 D Street SE

City Washington State DC Zip Code 20003-2438

Purpose of Disbursement  
Donation

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

012  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2014

Transaction ID : SB29-884-1017-e

Amount of Each Disbursement this Period

1000

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

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

3500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Kelly PAC**

Full Name (Last, First, Middle Initial)

## A. New Hampshire Sheriff's Association

Mailing Address 42 County Drive

City Laconia State NH Zip Code 03246-2900

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

Transaction ID : SB29-449-1007-e

Amount of Each Disbursement this Period

500
-----

Full Name (Last, First, Middle Initial)

## B. NHGOP Women's PAC

Mailing Address 12 Kingston Road

City Plaistow State NH Zip Code 03865-2211

Purpose of Disbursement  
Non-Federal Contribution

012

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2014

Transaction ID : SB29-878-996-e

Amount of Each Disbursement this Period

400
-----

Full Name (Last, First, Middle Initial)

## C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

900.00
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4400.00
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Kelly PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Gula Graham Group</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: PAC Event/Food & Beverage/Fax/Email/Shipping
Mailing Address 499 S Capitol Street SW Suite 420	
City State Zip Code Washington DC 20003-4027	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10-DEBT1031</b>	
Amount Incurred This Period <input type="text" value="3362.23"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="3362.23"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
---	---	---	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
---	---	---	---

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3362.23"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="3362.23"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3362.23"/>