





**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3P (Rev. 03/2011)

Page 3

NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT MICHAEL BICKELMEYER

Report Covering the Period:

From:

10' 01' 2014

To:

01' 01' 2015

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

16. FEDERAL FUNDS (Itemize on Schedule A-P).....		
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized.....		
(ii) unitemized.....		
(iii) Total contributions.....		
(b) Political Party Committees.....		
(c) Other Political Committees.....		
(d) The Candidate.....	266.13	1327.03
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)).....	266.13	1327.03
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate.....		
(b) Other Loans.....		
(c) TOTAL LOANS (Add 19(a) and 19(b)).....		
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating.....		279.45
(b) Fundraising.....		
(c) Legal and Accounting.....		
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)).....		
21. OTHER RECEIPTS (Dividends, Interest, etc.).....		
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21).....	266.13	1606.48

11-01-2014 10:01:00



**ALLOCATION OF PRIMARY EXPENDITURES  
 BY STATE FOR  
 A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving  
 or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C00553206

COMMITTEE TO ELECT MICHAEL BICKELMEYER

ADDRESS (number and street)

12540 DEER CREEK DRIVE APT. 103

NORTH ROYALTON

CITY

OH

STATE

44133

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama		
Alaska		
Arizona		
Arkansas		
California		
Colorado		
Connecticut		
Delaware		
District of Columbia		
Florida		
Georgia		
Hawaii		
Idaho		
Illinois		

11-01-01-1101010101

451 001 10000000

STATE ALLOCATION This Period TOTAL ALLOCATION To Date

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana		
Iowa		
Kansas		
Kentucky		
Louisiana		
Maine		
Maryland		
Massachusetts		
Michigan		
Minnesota		
Mississippi		
Missouri		
Montana		
Nebraska		
Nevada		
New Hampshire		
New Jersey		
New Mexico		
New York		
North Carolina		
North Dakota		
Ohio		
Oklahoma		
Oregon		
Pennsylvania		



**DETAILED SUMMARY PAGE**

NAME OF COMMITTEE (in Full)  
**COMMITTEE TO ELECT MICHAEL BICKELMEYER**

Report Covering the Period: From: **10** / **01** / **2014** To: **01** / **01** / **2015**

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

23. OPERATING EXPENDITURES.....		1,595.68
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		279.45
25. FUNDRAISING DISBURSEMENTS .....		1,316.23
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....		
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....		
(b) Other Repayments .....		
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....		
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....		
(b) Political Party Committees.....		
(c) Other Political Committees .....		
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) .....		
29. OTHER DISBURSEMENTS .....		
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....		1,316.23

**III. CONTRIBUTED ITEMS  
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....		
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11030101-1-100-1-101

## INSTRUCTIONS

(Calculated from FEC Form 3P, page 2. This worksheet must be retained to support, in part, the amount reported on Line 13.)

FEC Form 3P, Worksheet, is for use by a candidate or the principal authorized committee of a candidate, to track expenditures subject to limitation during the primary campaign (52 U.S.C. § 30116(b)(1)(A)). As soon as possible after the beginning of the calendar year, the Commission will publish the adjusted limits to be used during the election cycle. The 20% fundraising exemption will be based on the published overall expenditure limitation.

Line A - From FEC Form 3P, page 2, enter the calendar year-to-date total for operating expenditures.

Line B - Enter the calendar year-to-date total of offsets to operating expenditures.

Line C - Subtract Line B from Line A.

Line D - If reports were filed in a prior year(s), from the year end report(s), enter the calendar year-to-date total for operating expenditures.

Line E - From the year-end report(s) for the prior year(s), enter the calendar year-to-date total for offsets to operating expenditures.

Line F - Subtract Line E from Line D.

Line G - From FEC Form 3P, page 2, enter the calendar year-to-date total for fundraising disbursements.

Line H - Enter the calendar year-to-date total for offsets to fundraising disbursements.

Line I - Subtract Line H from Line G to obtain the net fundraising disbursements for the current year.

Line J - If reports were filed in a prior year(s), enter the calendar year-to-date total for fundraising disbursements from the year-end report(s).

Line K - If offsets to fundraising disbursements were received in a prior year(s), enter the calendar year-to-date total from the year-end report(s).

Line L - Subtract Line K from Line J.

Line M - Add Line I and Line L.

Line N - Enter 20% of the overall expenditure limit as published by the FEC.

Line O - Subtract Line N from Line M. If the result is less than zero, enter -0-. If greater than zero, enter the amount.

Line P - Add Line C, Line F, and Line O to obtain the total of operating expenditures made by the Committee subject to 52 U.S.C. § 30116(b)(1)(A) limitation. The total reflected on Line P, "Total Expenditures Subject to limitation," is carried forward to FEC Form 3P, Page 1, Line 13.

If the candidate has authorized other political committees, the principal campaign committee must first consolidate the calendar year-to-date receipt and disbursement activity on FEC Form 3P, page 4 (Consolidated Report of Receipts and Disbursements). FEC Form 3P, Worksheet, is completed using the appropriate column totals from the current and previous calendar year (if any) consolidation reports.

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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

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)

COMMITTEE TO ELECT MICHAEL BICKELMEYER

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

Bickelmeyer, Michael

Mailing Address

12540 Deer Creek Drive APT. 103

City

North Royalton

State

Ohio

Zip Code

44133

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Security Officer

Receipt For:

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

132703

Date of Receipt

12 / 31 / 2014

Amount of Each Receipt this Period

2661.3

**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

**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

Subtotal Of Receipts This Page (optional).....

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

11-01-2014 10:00 AM

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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)

**COMMITTEE TO ELECT MICHAEL BICKELMEYER**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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**A.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type
-------------------

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period
---

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type
-------------------

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period
---

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type
-------------------

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period
---

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Subtotal Of Receipts This Page (optional).....

Subtotal Of Receipts This Page (optional)
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Total This Period (last page this line number only).....

Total This Period (last page this line number only)
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**SCHEDULE C-P  
LOANS**

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

PAGE OF

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT MICHAEL BICKELMEYER

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

City State ZIP Code

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

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
 Yes  No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

Subtotal Of Receipts This Page (optional).....▶

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

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

20110301 11:00:00 AM

**LOANS AND LINES OF CREDIT FROM  
LENDING INSTITUTIONS**

NAME OF COMMITTEE (in full, type or print)

FEC IDENTIFICATION NUMBER

**C00553206**

**COMMITTEE TO ELECT MICHAEL BICKELMEYER**

FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP CODE

AMOUNT OF LOAN

INTEREST RATE (APR)  %

DATE INCURRED OR ESTABLISHED  /  /

DATE DUE  /  /

A. Has loan been restructured?  No  Yes If yes, date originally incurred:  /  /

B. If line of credit:  Amount of this draw  Total outstanding balance

C. Are other parties secondarily liable for the debt incurred?  No  Yes (Endorsers and guarantors must be reported on Schedule C-P)

D. Are ANY of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  No  Yes

If yes, specify: \_\_\_\_\_

What is the value of this collateral:  Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, or future receipts of public financing pledged as collateral for this loan?  No  Yes  
If yes, specify: \_\_\_\_\_

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established:  /  /

Location of account: \_\_\_\_\_

Date debtor authorized the Secretary of the U.S. Treasury to make direct deposits of public financing payments to the depository account:  /  /

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and demonstrate that it assures repayment.  
\_\_\_\_\_  
\_\_\_\_\_

G. Type or Print Name of Committee Treasurer

MICHAEL BICKELMEYER

Signature of Treasurer *Michael Bickelmeier*

Date 07' 07' 2015

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
2. The loan was made on terms and conditions (including interest rate) no more favorable at the time that those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
3. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth in 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

Type or Print Name of Authorized Representative

\_\_\_\_\_

Title

\_\_\_\_\_

Signature of Authorized Representative

Date

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

NAME OF COMMITTEE (In Full)  
**COMMITTEE TO ELECT MICHAEL BICKELMEYER**

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

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

- 1) **SUBTOTALS** This Period This Page (optional) ..... ➔
- 2) **TOTALS** This Period (last page this line number only) ..... ➔
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ➔
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ..... ➔

20110301 11:00:00 AM

# COMMITTEE TO ELECT MICHAEL BICKELMEYER

		Senatorial & Presidential				
Dec	13	MB CK S32 02662878306	1100			1100
	24	CK Print Fee			2695	7305
Feb	16	Walmart 400 Envelopes			1311	5994
	17	Walmart Receipt Book			793	5251
	17	Office Max Account Book 3 Column			1187	4064
	17	MB CK SS2 02662878306	500			54064
	18	MB CK SS3 02662878306	600			114064
	21	GO DADDY WEBSITE 3 yrs <sup>53474016</sup> <sub>60296691</sub>			47573	66491
	23	MB CK SS6 02662878306	1100			76491
	25	GO DADDY Return Offset	47573			124064
	26	Account Closed Refund To MB			124064	
Mar	13	MB CK SS3 02662878306	1300			1300
	20	GoDaddy Website 3 yrs.			47273	82727
	21	House of Magnets 1500 Magnets			73195	9532
	21	Walmart 100 Envelopes			213	9319
	24	GoDaddy Return Offset	8316			17635
	28	US Post Office Postage 247 Stamps			12103	5532
	28	Deposit MB Cash	200			25532
	30	GoDaddy Email 3 yrs Unlimited Add.			20131	5901
	30	GoDaddy Correction			21317	4215
Apr	6	Office Max Ret Add Labels			2590	1625
	14	US Post Office Postage			770	855
	16	Walmart 300 Envelopes			638	217
	19	Deposit MB Cash	40			4217
	19	US Post Office Postage			7	3517
	21	US Post Office Postage			14	2117
	22	Bank Fee Overdraft			36	(11483)
	23	Bank Fee Overdraft			36	(5083)
	25	MB Cash	50			83
	25	MB Cash	100			9917
	28	US Post Office Postage			2170	7747

1511011-110303030M

141-041-110504

May	2	US Post Office Postage			21170	5577	Oct 20	US
	10	US Post Office Postage			21100	3477		24 MB
	17	US Post Office Postage			2310	1167		24 US
	19	US Post Office Postage			490	677		31 MB
	19	MB Cash	15000			15677	Nov 1	US
	19	Walmart Envelopes			1536	14141		2 Wal
	24	US Post Office Postage			3010	11131		3 MB
	31	US Post Office Postage			2870	8261		7 US
June	7	US Post Office Postage			2590	5671		
	11	Walmart 500 Envelopes			2049	3622		
	13	MB Cash	100			13622		
	13	US Post Office Postage			56	8022		
	27	US Post Office Postage			7490	532		
May	5	MB Debit Card 5175451661807175		2590		3122		
	5	Office Max Ret. Address Labels			2590	532		
June	13	MB Debit Card 5175451661807175		2590		3122		
	13	Office Max Ret. Address Labels			2590	532		
Sept	29	MB Cash		10		1532		
	29	Walmart 2 Reams Paper			804	728		
	29	MB Cash		20		2728		
	30	US Post Office Postage			1260	1468		
Oct	1	MB Cash		50		6468		
	1	US Post Office Postage			4949	1519		
	6	MB Cash		71		8619		
	6	US Post Office Postage			6811	1808		
	11	MB Cash		20		3808		
	11	Walmart Envelopes			2049	1759		
	13	MB Cash		51		6859		
	13	Giant Eagle Postage			49	1959		
	16	MB Cash		100		11959		
	16	Office Max 2 Reams Paper			1081	10878		

2170	5577	Oct 20	US Post Office Postage			5390	5488
2150	3477	24	MB Cash	52	-		10688
3310	1167	24	US Post Office Postage			98	888
490	677	31	MB Cash	92	26		10114
	15677	Nov 1	US Post Office Postage			49	5214
1536	114141	2	Walmart Envelopes + Copy Paper			2852	2362
3010	11131	3	MB Cash	96	-		11962
2870	8261	7	US Post Office Postage			98	2162
2590	5671						
2049	3622						
	3622						
56	8022						
7490	532						
3	3122						
2590	532						
6	3122						
2590	532						
	1532						
804	728						
	2728						
1260	1468						
	6468						
4949	1519						
	8619						
6811	1808						
	3808						
2049	1759						
	6859						
49	1959						
	11959						
1081	10878						



RECEIVED

NOV 18 10 00 AM

FEC MAIL CENTER

U.S. POSTAGE  
PAID  
STRONGSVILLE, OH  
44136  
DEC 30, 14

AMOUNT  
**\$1.61**

00118664-08



20483



1000

**First Class Mail**  
**First Class Mail**

FEC

999 E. St. NW

Washington, DC.

20463

FIRST CLASS MAIL PERMIT NO. 1000 STRONGSVILLE, OH

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>12/30/14</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*Jh*  
 PREPARER  
 (8/2013)

*1/8/2015*  
 DATE PREPARED

11-01-14 10:00:00