Image# 14941249634 PAGE 1 / 19

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORW 3X	For Other	Than An Autl	horized Comm	ittee		Office Use Only
NAME OF COMMITTEE (in fu	TYPE OR	PRINT ▼	Example: If ty		12FE4M5	
COUNTRY FIRS	ST POLITICAL	ACTION CO	MMITTEE			
ADDRESS (number and ▼	street) 228 S W	ASHINGTON STRE	EET SUITE 115			
Check if different						
than previously reported. (ACC		IDRIA			VA L	22314
2. FEC IDENTIFICA	TION NUMBER V	CIT	Y 🛦		STATE A	ZIP CODE ▲
C C00457705			S THIS X	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPO (Choose One)	Rep		20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Repo		Mar	20 (M3)	Jun 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly	Report (Q1)		20 (M4)	Jul 20 (M7)	,	20 (M10) Jan 31 (YE)
July 15	Report (Q2) (c)	12-Day PRE-Election	X Primary (General (
October 19 Quarterly	5 Report (Q3)	Report for the:	Convention		Special (1	
January 3 Year-End	1 Report (YE)	Electio	n on 06	03	2014	in the State of IA
July 31 Mi Report (No Year Only)	on-election	30-Day POST-Election Report for the:	General (30G)	Runoff (3	OR) Special (30S)
Terminatio (TER)	n Report	Electio	n on	/ D D /	Y Y Y Y Y	in the State of
5. Covering Period	M M / D 01	D / Y Y Y Y 2014	throug	n 05	/ D D /	2014
I certify that I have exa	mined this Report a	and to the best of	my knowledge ar	d belief it is tru	e, correct and	complete.
Type or Print Name of	Treasurer Salvator	e Purpura				
Signature of Treasurer	Salvatore Purpura		[Electronic	ally Filed]	ate 05	19 / 2014
	se, erroneous, or inc	omplete information	n may subject the p	person signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

01 05 2014 Report Covering the Period: 04 2014 14 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 125048.34 January 1, 2014 (b) Cash on Hand at 31194.42 Beginning of Reporting Period..... 84654.27 29809.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 61003.42 209702.61 6(a) and 6(c) for Column B)..... 23761.46 172460.65 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 37241.96 37241.96 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 2215.00 Schedule C and/or Schedule D)

×

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)

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

I. Receipts	rt Covering the Period: From: 04 01 2014 To: COLUMN A Tatal This Pariod					
<u> </u>	Total This Period	Calendar Year-to-Date				
. Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees	12650.00	32575.00				
(i) Itemized (use Schedule A)	7					
(ii) Unitemized	4094.00	16591.62				
(iii) TOTAL (add	, 1001.00					
Lines 11(a)(i) and (ii)	16744.00	49166.62				
2.1100 FT(a)(i) and (ii)	7					
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees						
(such as PACs)	13000.00	20000.00				
(d) Total Contributions (add Lines	, , , , , , , , , , , , , , , , , , , ,					
11(a)(iii), (b), and (c)) (Carry						
Totals to Line 33, page 5)▶	29744.00	69166.62				
2. Transfers From Affiliated/Other						
Party Committees	0.00	0.00				
-						
3. All Loans Received	0.00	0.00				
	, , , , , , , , , , , , , , , , , , , ,					
L Loan Repayments Received	0.00	0.00				
5. Offsets To Operating Expenditures						
(Refunds, Rebates, etc.)						
(Carry Totals to Line 37, page 5)	65.00	65.00				
6. Refunds of Contributions Made	7	7				
to Federal Candidates and Other						
Political Committees	0.00	0.00				
7. Other Federal Receipts	7					
(Dividends, Interest, etc.)	0.00	15422.65				
3. Transfers from Non-Federal and Levin Funds	7					
(a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(b) Leviii i unus (nom senedule ris)						
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
D. Total Receipts (add Lines 11(d),		04054.07				
12, 13, 14, 15, 16, 17, and 18(c))▶	29809.00	84654.27				
Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	29809.00	84654.27				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal	1000 1110 1 01100	Calcinal Ical-to-Date		
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	11261.46	143960.65		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	11261.46	143960.65		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	12500.00	28500.00		
Independent Expenditures	200	0.00		
(use Schedule E)Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(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 28(a), (b), and (c))▶	0.00	0.00		
(aud Lines 20(a), (b), and (c))				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	23761.46	172460.65		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	23761.46	172460.65		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	29744.00	69166.62		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29744.00	69166.62		
3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11261.46	143960.65		
7. Offsets to Operating Expenditures (from Line 15, page 3)	65.00	65.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	11196.46	143895.65		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LIN	PAGE		6	OF		19			
(check only one)									
X 11a	11c		12						
13		14		15		16	,		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.

or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL	ACTION COMMITTEE	
Full Name (Last, First, Middle Initial) A. ROBERT BERGMAN Mailing Address 609 WEST JOSEPHINE ST	Date of Receipt	
City WEATHERFORD FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code TX 76086-4055 C Occupation RETIRED Aggregate Year-to-Date ▼ 250.00	Transaction ID : SA11.3083287 Amount of Each Receipt this Period 250.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) MR. WAYNE L. BERMAN Mailing Address 3055 WHITEHAVEN STREE City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer THE BLACKSTONE GROUP Receipt For: Primary General Other (specify)	State Zip Code DC 20008-3613 C Occupation SENIOR ADVISOR Aggregate Year-to-Date ▼ 5000.00	Date of Receipt M
Full Name (Last, First, Middle Initial) MR. ARTHUR R. HILSINGER Mailing Address 8 JACKSON POND ROAD City DEDHAM FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code MA 02026-5524 C Occupation RETIRED Aggregate Year-to-Date ▼ 500.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		5750.00
TOTAL This Period (last page this line numbe	r only)	

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

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

	FOR LINE	_	: PA	GE 7	OF	19
(check only one)						
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	13	14	15	16	3	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	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL	ACTION COMMITTEE					
···	Full Name (Last, First, Middle Initial) AMBASSADOR ALFRED HOFFMAN JR. Mailing Address 12530 SEMINOLE BEACH ROAD					
City NORTH PALM BEACH FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: Primary Other (specify)	State Zip Code FL 33408-2534 C Occupation INVESTOR Aggregate Year-to-Date ▼ 5000.00	Transaction ID : SA11.3083289 Amount of Each Receipt this Period 5000.00 CONTRIBUTION				
Full Name (Last, First, Middle Initial) MR. ROBERT P. KERN Mailing Address 45 SPRING HOUSE LANE City BERRYVILLE FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify)	State Zip Code VA 22611-3138 C Occupation TRAVEL AGENT Aggregate Year-to-Date ▼ 500.00	Date of Receipt 04 03 2014 Transaction ID: SA11.3083252 Amount of Each Receipt this Period 500.00 CONTRIBUTION				
Full Name (Last, First, Middle Initial) MR. JOHN W. MITCHELL Mailing Address 250 E. 54TH ST. APT. 38D City NEW YORK FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code NY 10022-4810 C Occupation RETIRED Aggregate Year-to-Date ▼ 250.00	Date of Receipt 04 03 2014 Transaction ID: SA11.3083235 Amount of Each Receipt this Period 250.00 CONTRIBUTION				
SUBTOTAL of Receipts This Page (optional)	>	5750.00				
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:					PAGE	8	OF	19	
(check only one)										
	X 11a 11b					11c	12			
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL A	ACTION COMMITTEE	
A.	Full Name (Last, First, Middle Initial) THOMAS SUDBERRY Mailing Address 5465 MOREHOUSE DRIVE SUITE 260 City SAN DIEGO FEC ID number of contributing federal political committee. Name of Employer SUDBERRY PROPERTIES Receipt For: Primary General Other (specify)	State Zip Code CA 92121-4714 C Occupation CHAIRMAN Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / 03 2014 Transaction ID: SA11.3083288 Amount of Each Receipt this Period 500.00 CONTRIBUTION
В.	Full Name (Last, First, Middle Initial) MR. RUDIGER VON KRAUS Mailing Address 1 PARKLAWN ROAD City BOSTON FEC ID number of contributing federal political committee. Name of Employer ADDEX INC. Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MA 02132-1011 C Occupation BUSINESSMAN Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) MS. FRANCES ANN ANN WALKE Mailing Address 5920 N. CAMINO PADRE ISID City TUCSON FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify) Other (specify)		Date of Receipt M M M O3 2014 Transaction ID: SA11.3083251 Amount of Each Receipt this Period 100.00 CONTRIBUTION
S	SUBTOTAL of Receipts This Page (optional)	<u> </u>	850.00
Т	OTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

	FOR LINE NUMBER:					PAGE	:	9	OF	19	
(check only one)											
	X 11a 11b					11c		12			
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL A	CTION COMMITTEE	
۸.	Full Name (Last, First, Middle Initial) MS. FRANCES ANN ANN WALKER Mailing Address 5920 N. CAMINO PADRE ISID City TUCSON FEC ID number of contributing federal political committee. Name of Employer	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	RETIRED Receipt For: Primary General Other (specify)	RETIRED Aggregate Year-to-Date ▼ 400.00	
3.	Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer Receipt For:	C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)		
Э.	Mailing Address City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		300.00
Т	OTAL This Period (last page this line number o	nly)	12650.00

S П

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 19 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) COUNTRY FIRST POLITICAL A	CTION	COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) AT&T INC. FEDERAL PAC Mailing Address 208 S. AKARD ST. STE. 2701			Date of Receipt 04 14 2014
	City DALLAS	State TX	Zip Code 75202-4206	Transaction ID : SA11.3083353
	FEC ID number of contributing federal political committee.		0109017	Amount of Each Receipt this Period 5000.00
	Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼ 5000.00	CONTRIBUTION
В.	Full Name (Last, First, Middle Initial) PINNACLE WEST CAPITAL CORPO Mailing Address 400 N. 5TH STREET	Date of Receipt 05 12 2014		
	City PHOENIX	State AZ	Zip Code 85004-3902	Transaction ID : SA11.3083623 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0015933	5000.00 CONTRIBUTION
	Name of Employer Receipt For:	Occupation		CONTRIBUTION
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) TIME WARNER CABLE FEDERAL	_ PAC		Date of Receipt
	Mailing Address 901 F ST. NW STE. 800			04 01 2014
	City WASHINGTON	State DC	Zip Code 20004-1477	Transaction ID : SA11.3083016 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0431551	3000.00
	Name of Employer	Occupation	1	CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00	
S	UBTOTAL of Receipts This Page (optional)			13000.00

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

7 7

13000.00

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 19							19	
	EMIZED DISBURSEMENTS	Use separ	FOR LINE NUMBER: PAGE 11 OF 19 (check only one)							10		
11	EIVIIZEU DIODUROEIVIEN IO		category of the	(criccit of i	,	2 [23		24	25		26
		Detailed S	Summary Page	27		Ba	28b	H	28c	29	H	30b
Δr	by information copied from such Reports and Staten	nents may n	ot he sold or us	sed by any nero	son for	he ni	ırnose	of so	liciting	Contrib	utions	
	for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full)											
$ \rangle$	COUNTRY FIRST POLITICAL ACT	TION CC	MMITTEE									
\angle			-									
	Full Name (Last, First, Middle Initial)		<u> </u>	<u> </u>								
A.	SALVATORE PURPURA						oisburse	emen				
	Mailing Address 2701 N OCEAN BLVD			04 01 201							Y	
	MINING AUDIESS 2/01 IN OCEAN BLVD					J '4		1		2014	_	
	City	State	Zip Code		<u> </u>		:					
	FT LAUDERDALE	FL	33308		Tr	ansac	tion ID	: SE	321.2			
	Purpose of Disbursement				1							
	COMPLIANCE CONSULTING				Am	ount o	f Each	Disb	ourseme	ent this	Perio	d
	Candidate Name			Category/						195	50.00	
	Office Sought: House Disburser	nent Eor:		Туре	-	-	7		- 7			-
		Primary	General									
	President	Other (spec										
	State: District:	/-I	-/ *									
	Full Name (Last, First, Middle Initial)											
В.	AMERICAN EXPRESS				Dat	e of D	isburs	emen	ıt			
					M M / D D / Y Y Y Y							
	Mailing Address PO BOX 1270					04	()7	L	2014		
	City	Stata	Zin Code									
	City S NEWARK	State NJ	Zip Code 07101		Tı	ansad	tion IE) : SE	321.5			
	Purpose of Disbursement		07.101		-							
	CREDIT CARD MERCHANT FEE				Amount of Each Disburseme					ent this	Perio	d
	Candidate Name											
				Category/ Type		_	7	_	7		5.51	_
	Office Sought: House Disbursen											
		Primary	General									
	State: District:	Other (spec	ııy) ▼									
_	Full Name (Last, First, Middle Initial)											
C.	CAMPAIGN SOLUTIONS				Dat	e of D	oisburse	emen	ıt			
	CANNI AIGIN GOLOTIONS					м		D		Y	Y	
	Mailing Address 117 N ST ASAPH ST				1)4		3		2014		
	,	State	Zip Code		Tr	ansad	tion IE	: SE	321.16			
	ALEXANDRIA Purpose of Disbursement	VA	22314		-				-			
	WEB SERVICE				Λ	sunt -	f East	Dial	NIKO 0	nt thi-	Doric	٦
	Candidate Name			Cotomani	Am	ount o	ı∟acn	טואני	ourseme	ent this	Perio	u
				Category/ Type			-	_		247	4.67	
	Office Sought: House Disburser	nent For:		71 ·			1		7			
	Senate	Primary	General									
	President	Other (spec	ify) ▼									
	State: District:											
							-		-	4.40	0.10	
Ls	UBTOTAL of Disbursements This Page (optional)			···········			7		7	443	0.18	
ļ -	OTAL This Period (last nage this line number only)		<u> </u>									

S	CHEDULE B (FEC Form 3X)					F NUMBER: PAGE 12 OF 19							
	•	Use sepa		E NUMBER: PAGE 12 OF 19 nly one)									
П	EMIZED DISBURSEMENTS		category of the	(check 0	•	22		23		24	25		7 26
		Detailed S	Summary Page	27		28a	Н	28b		28c	29		30b
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	ny information copied from such Reports and Statem for commercial purposes, other than using the name												5
۲	NAME OF COMMITTEE (In Full)		230 C. arry point		0 00				0111	24011	5011111		
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/	COUNTRY FIRST POLITICAL ACT	I ION CC											
<u></u>	Full Name (Last, First, Middle Initial)												
Α.	CAPLIN & DRYSDALE					Date of	f Dis	burse	ment				
	ON LING DIVIOUALL					M = M	,	D		V	Y Y	V	
	Mailing Address ONE THOMAS CIR NW STE 1100			05 07 2014							- '		
	City	State	Zip Code			-	41	15	000	4.40			
	WASHINGTON	DC	20005			Trans	actio	on ID	: SB2	1.12			
	Purpose of Disbursement												
	LEGAL CONSULTING					Amount	t of I	Each	Disbu	rseme	nt this	Perio	bc
	Candidate Name			Category/	_					-	30	4.00	
				Type				7	_	7	30	, -1 .00	
	Office Sought: House Disbursen												
		Primary	General										
		Other (spec	cify) 🔻										
_	State: District:												
_	Full Name (Last, First, Middle Initial)												
В.	CHAIN BRIDGE BANK					Date of	f Dis	burse	ment				
						M = M	/	D I			Y Y	_ Y	
	Mailing Address 1445-A LAUGHLIN AVE					04		1:	5		2014		
	City												
	,	State VA	Zip Code 22101			Trans	sacti	on ID	: SB2	21.1			
	Purpose of Disbursement	¥/1	ZZ 1U I		_								
	BANK FEE					Amount	t of I	Each	Disbu	rseme	nt this	Perio	od
	Candidate Name			Category/						-			
							7				9.87		
	Office Sought: House Disbursen	nent For:		Туре	\dashv					,			
		Primary	General										
		Other (spec											
	State: District:	` .	- · ·										
_	Full Name (Last, First, Middle Initial)												
C.	CMDI					Date of	f Dis	burse	ment				
						M M	1	D		Υ	YY	Y	
	Mailing Address 1593 SPRING HILL RD					05	ľ	07			2014		
	<u> </u>												
	City	State	Zip Code			Trans	anti-	חו חח	. QD1	1 10			
		VA	22182			114118	acii	טוו ווט	. 302	0			
	Purpose of Disbursement DATABASE MANAGEMENT				1								
						Amount	t of I	Each	Disbu	rseme	nt this	Perio	bc
	Candidate Name			Category/	_					-	155	0.40	
				Type				,		7	100	0.40	
	Office Sought: House Disbursen												
		Primary	General										
		Other (spec	city) 🔻										
	State: District:												
							_	-	_	-	4.5	4.0=	
8	SUBTOTAL of Disbursements This Page (optional)			·····	•			7		7	191	4.27	
Г					_			-		-			
Ιī	OTAL This Period (last nage this line number only)												

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 OF 19							
	EMIZED DISBURSEMENTS	Use separate sche	(check only	LINE NOMBER.							
11	LIVIIZED DISBURSEIVIEN IS	for each category		X 21b	22	23	24	25	26		
		Detailed Summary	rage	27	28a	28b	28c	29	30b		
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	for commercial purposes, other than using the name										
\setminus	NAME OF COMMITTEE (In Full)										
$ \rangle$	COUNTRY FIRST POLITICAL ACT	TION COMMIT	TEE								
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Α.	Full Name (Last, First, Middle Initial)				D-1						
A.	CMDI				Date of I	Jisburse	ment				
	Mailing Address 1502 CDDING LULL DD				04 02 7 2014						
	Mailing Address 1593 SPRING HILL RD				04	Ü.		2014			
	City	State Zip Cod	le								
	TYSONS CORNER	VA 22182			Transa	ction ID	: SB21.9	9			
	Purpose of Disbursement										
	DATABASE MANAGEMENT			Amount	of Each	Disburse	ement this	s Period			
	Candidate Name			Category/				17	03.82		
	Office Country House	and Fee		Туре		7	7		33.32		
	Office Sought: House Disburser Senate		noral								
	President	Primary Ge Other (specify) ▼	neral								
	State: District:	Other (specify)									
_	Full Name (Last, First, Middle Initial)										
В.					Date of I	Disburse	ment				
-					M M		D /	Y	Y		
	Mailing Address 117 NORTH ST ASAPH ST				04 03 2014						
	,	State Zip Cod	le		Transa	ction ID	: SB21.7	7			
	ALEXANDRIA Purpose of Disbursement	VA 22314									
	CREDIT CARD MERCHANT FEE			ement this	s Period						
	Candidate Name			0.11	, anount (
				Category/ Type				3	35.56		
	Office Sought: House Disbursen	nent For:		.,,,,		,	7				
		Primary Ge	neral								
	President	Other (specify)									
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	Full Name (Last, First, Middle Initial)										
C.	EDONATION				Date of I	Disburse	ment				
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	Mailing Address 117 NORTH ST ASAPH ST				05	02	2	2014			
	City	State Zip Cod	le .								
	ALEXANDRIA	VA 22314			Transa	ction ID	: SB21.8	В			
	Purpose of Disbursement										
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	Candidate Name			Category/		-	-		01.44		
				Туре		7		-	91.41		
	Office Sought: House Disburser		_								
	Senate	,	neral								
	President Pictriot:	Other (specify)									
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\setminus	NAME OF COMMITTEE (In Full)													
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\angle	Full Name (Last, First, Middle Initial)													
Α.	ELAVON						Date	of D	isburse	eme	nt			
							M	M	/ D	D	/ Y	YY	Υ	
	Mailing Address 1 CONCOURSE PKWY						04	1	C)2	L	2014	_	
	Cit.	24-4-	Zin Code											
	City S ATLANTA	State GA	Zip Code 30328				Tra	nsac	tion ID	: SI	B21.4			
	Purpose of Disbursement		00020			_								
	CREDIT CARD MERCHANT FEE						Amou	unt of	Each	Dis	burseme	nt this	Perio	bc
	Candidate Name			Ca	ategor	y/							8.11	
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	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (spe												
	State: District:	Cc. (opc	S y / ▼											
	Full Name (Last, First, Middle Initial)													
В.	ELAVON						Date	of D	isburse	∍mer	nt			
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	Mailing Address 1 CONCOURSE PKWY						0:	5	()2		2014	_	
	City	State	Zip Code				Tra	neac	tion ID		D21 6			
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	Purpose of Disbursement CREDIT CARD MERCHANT FEE						Amou	ınt of	Each	Die	burseme	ant thic	Porio	nd
	Candidate Name			L	-	_	AIIIO	arit O	Lacii	Disi	burserrie	, III IIII III	i enc	Ju
					ategor Type	'y/			-		-	8	4.99	
	Office Sought: House Disbursen	nent For:	l											
		Primary	General											
		Other (spe	cify) 🔻											
_	State: District:									_				
C.	Full Name (Last, First, Middle Initial) LOCKTON AFFINITY LLC						Date	of D	isburse	emer	nt			
•	EOCKTON ATTINITY EEC						M		/ D			Y	Υ	
	Mailing Address PO BOX 87-9610						04	1)5	Ĺ.	2014	١	
	,	State MO	Zip Code 64187				Tra	nsac	tion ID	: S	B21.11			
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	INSURANCE						Amoı	unt of	Each	Dis	burseme	ent this	Perio	od
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	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (spe												
	State: District:	(-)	····//											
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S	CHEDULE B (FEC Form 3X)			T				NUMBER: PAGE 15 OF 19					
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			Summary Page	27	28a	28			24 28c	29	_	30b	
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	ny information copied from such Reports and Staten for commercial purposes, other than using the name											6	
\vdash	NAME OF COMMITTEE (In Full)		7.										
$ \rangle$	COUNTRY FIRST POLITICAL ACT												
/	COUNTRY FIRST POLITICAL AC	I ION C											
_	Full Name (Last, First, Middle Initial)												
A.	US MONITOR				Date o	f Disbu	rse	ment					
	oo word on				M M	/		D /	Y	YY	Y		
	Mailing Address 86 MAPLE AVE				04	1.1.	02			2014			
								_					
	City	State	Zip Code		T		<u>. </u>	- CD1	24.45				
	NEW YORK	NY	10956		Iran	saction	טו	: 582	21.15				
	Purpose of Disbursement												
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	Candidate Name			Category/			7				3.73		
				Type		- 7	-		7	_	5.73		
	Office Sought: House Disburser												
		Primary	General										
	President	Other (spec	cify) 🔻										
_	State: District:												
_	Full Name (Last, First, Middle Initial)												
В.	US POSTMASTER				Date o	f Disbu	rse	ment					
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	Mailing Address 8409 LEE HWY				04	JL	02	2		2014			
	City		7in Codo										
	City S MERRIFIELD	State VA	Zip Code 22116		Tran	saction	ID	: SB2	21.13				
	Purpose of Disbursement	• • • • • • • • • • • • • • • • • • • •	22110										
	POSTAGE			Amount of Each Disbursement this Period						od			
	Candidate Name			0.1						-	-		
				Category/ Type	220.00						20.00		
	Office Sought: House Disbursen	nent For:		71									
		Primary	General										
	President	Other (spec	cify) 🔻										
	State: District:		•										
	Full Name (Last, First, Middle Initial)												
C.	US POSTMASTER				Date o	f Disbu	rse	ment					
	001 0011111101211				M M	/ [D /	Υ	YY	Y		
	Mailing Address 8409 LEE HWY				04		02	_		2014	.		
	•	State	Zip Code		Tran	saction	ID	: SB:	21.14				
	MERRIFIELD	VA	22116										
	Purpose of Disbursement POSTAGE												
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	Candidate Name			Category/			T		-	68	35.00		
	Office Sought: Haves		Туре		- 7	-		7					
	Office Sought: House Disburser Senate		Concret										
	President	Primary Other (spec	General										
	State: District:	Other (spec	ony) ▼										
_	otate. District.												
_ ا										ar	8.73		
L^{s}	SUBTOTAL of Disbursements This Page (optional)			·····		7		_	7	30	5.75		
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т т	LILAL This Period (last nade this line number only)			L									

SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 16 OF 19						
,	Use separate schedule(s)	FOR LINE (check only	E NOMBEN.						
ITEMIZED DISBURSEMENTS	for each category of the	(check only 21b							
	Detailed Summary Page	27	28a 28b 28c 29 30b						
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or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
COUNTRY FIRST POLITICAL AC	TION COMMITTEE								
/		· 							
Full Name (Last, First, Middle Initial)									
A. YUMA SOLUTIONS INC			Date of Disbursement						
Mailing Address DO DOV 150075			M M / D D / Y Y Y Y						
Mailing Address PO BOX 152075			04 18 2014						
City	State Zip Code								
TAMPA	FL 33684		Transaction ID: SB21.3						
Purpose of Disbursement									
COMPUTER SUPPORT			Amount of Each Disbursement this Period						
Candidate Name		Category/	574.00						
Office Sought: House Disburse	ment For:	Туре							
Senate	Primary General								
President	Other (specify)								
State: District:	· · · · · · · · · · · · · · · · · · ·								
Full Name (Last, First, Middle Initial)									
B.			Date of Disbursement						
			M = M / D = D / Y = Y = Y						
Mailing Address									
City	State Zip Code								
J.,	2ip 0000								
Purpose of Disbursement									
		Amount of Each Disbursement this Period							
Candidate Name		Category/							
Office Sought: House Bistone	mont For:	Туре							
Office Sought: House Disburse Senate	ment For: Primary General								
President	Other (specify)								
State: District:	(-p-o)/ ▼								
Full Name (Last, First, Middle Initial)									
C.			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address									
City	State Zip Code								
Ony	Ciale Zip Code								
Purpose of Disbursement									
			Amount of Each Disbursement this Period						
Candidate Name		Category/							
000		Type							
Office Sought: House Disburse									
Senate President									
State: District:	Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional).			574.00						
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	B (FEC Form 3X)	Use separate schedule(s	FOR LINE NUMBER: PAGE 17 OF 19							
ITEMIZED DI	SBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b					
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I \	MITTEE (In Full) Y FIRST POLITICAL ACT	TION COMMITTEE	Ē							
_ `	, First, Middle Initial)			Date of Disbursement						
A. CITIZENS	FOR COCHRAN			05 14 2014						
Mailing Address	228 S WASHINGTON ST-SUITE 3	330								
City ALEXANDRIA	,	State Zip Code VA 22314		Transaction ID : S	B23.5					
Purpose of Disb COMMITTEE C				Amount of Each Dis	bursement this Period					
Candidate Name THAD COC			Category/ Type	7	2500.00					
Office Sought: State: MS	Senate President	nent For: 2014 Primary General Other (specify)								
Full Name (Last	District: , First, Middle Initial) SPIE FOR SENATE			Date of Disburseme						
Mailing Address	PO BOX 71596		05 01	2014						
City RICHMOND		State Zip Code VA 23225		Transaction ID : S	B23.2					
	CONTRIBUTION		Amount of Each Disbursement this Period							
Candidate Name ED GILLES	SPIE		Category/ Type	,	2500.00					
Office Sought: State: VA		nent For: 2014 Primary General Other (specify)								
Full Name (Last C. JONI FOR	, First, Middle Initial)			Date of Disburseme	nt					
Mailing Address	PO BOX 93441			05 01	2014					
City DES MOINES		State Zip Code IA 50393		Transaction ID : S	B23.3					
Purpose of Disb COMMITTEE C				Amount of Each Dis	bursement this Period					
Candidate Name JONI ERN			Category/ Type		2500.00					
Office Sought: State: IA	House Disburser Senate President District:	ment For: 2014 Primary General Other (specify) ▼		,	,					
	sbursements This Page (optional) d (last page this line number only)				7500.00					

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 18 OF 19							
	EMIZED DISBURSEMENTS	Use separate schedule(s) (check only	NOMBER.						
••		for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26						
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or	for commercial purposes, other than using the name	ne and address of any polit	ical committee to	solicit contributions from such committee.						
$ \setminus $	NAME OF COMMITTEE (In Full)		_							
/	COUNTRY FIRST POLITICAL ACT	TION COMMITTEE								
\angle	Full Name (Last, First, Middle Initial)									
Α.	NEW HAMPSHIRE FOR SCOTT B		==	Date of Disbursement						
	NEW HAWI SHIRE FOR SCOTT E	DICOVIN COMMINITI		M M / D D / Y Y Y Y						
	Mailing Address PO BOX 600			05 09 2014						
	,	State Zip Code		Transaction ID : SB23.6						
	RYE	NH 03870		_						
	Purpose of Disbursement COMMITTEE CONTRIBUTIONIN-KIND LIST REN	NTAL		Amount of Each Disbursement this Period						
	Candidate Name			Amount of Each Disbursement this Feriod						
	SCOTT BROWN		Category/ Type	2215.00						
		ment For: 2014	,,,,,	[MEMO ITEM]						
	X Senate	Primary General		SEE SD10.1 CAMPAIGN SOLUTIONS						
	President	Other (specify) ▼								
	State: NH District:									
_	Full Name (Last, First, Middle Initial)			B						
В.	OSBORN FOR SENATE INC			Date of Disbursement						
	Mailing Address PO BOX 214			04 11 2014						
	Mailing Address PO BOX 214			04 11 2014						
	City	State Zip Code		Transaction ID : SB23.1						
	WATERLOO	NE 68069		Transaction id . 3023.1						
	Purpose of Disbursement COMMITTEE CONTRIBUTION			Assessment of Freeh Diehouse assessment this Besterl						
	Candidate Name			Amount of Each Disbursement this Period						
	SHANE OSBORN		Category/ Type	2500.00						
		ment For: 2014	туре							
		Primary General								
	President	Other (specify) ▼								
	State: NE District:									
	Full Name (Last, First, Middle Initial)									
C.	STEVE DAINES FOR MONTANA			Date of Disbursement						
	M. W. All Department			M M / D D / Y Y Y Y Y						
	Mailing Address PO BOX 1598			05 06 2014						
	City	State Zip Code								
	-	MT 59624		Transaction ID: SB23.4						
	Purpose of Disbursement									
	COMMITTEE CONTRIBUTION			Amount of Each Disbursement this Period						
	Candidate Name STEVE DAINES		Category/	2500.00						
		ment For: 2014	Туре	7						
	Senate	Primary General								
	President	Other (specify)								
	State: MT District:	· · · · · · · · · · · · · · · · · · ·								
5	SUBTOTAL of Disbursements This Page (optional)		·····	5000.00						
厂				12500.00						
1 7	'OTAL This Period (last nage this line number only)	1		12300.00						

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

PAGE 19 OF

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X	10

19

NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor	Nature of Debt (Purpose): PAYMENT OWED FOR NEW HAMPSHIRE
CAMPAIGN SOLUTIONS		FOR SCOTT
Mailing Address 117 N ST ASAPH ST		-
City State ALEXANDRIA	Zip Code VA 22314	
	VA 22314	Transaction ID : SD10.1
Outstanding Balance Beginning This Period		Transaction ib . 3D to.1
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
4689.67	2474.67	2215.00
B. Full Name (Last, First, Middle Initial) of Debt	or 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 Deb	otor or Creditor	Nature of Debt (Purpose):
Mailing Address		
City	Chala Zia Cada	
City	State Zip Code	
Outstanding Balance Beginning This Period		
Cutstanding Balance Deginning This Feriod		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, ,	, ,	, ,
SUPTOTALS This Devied This Dage (entires)		2215.00
) SUBTOTALS This Period This Page (optional).		
) TOTALS This Period (last page this line numb	er only)	2215.00
	0.4.	0.00
) TOTAL OUTSTANDING LOANS from Schedule	e C (last page only)	0.00
		2215.00
ADD 2) and 3) and carry forward to appropriat	e line of Summary Page (last page only)	22.10.00