

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC FINANCE

15 JAN 28 PM 3:19

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Stephen Shogan for Senate Committee

ADDRESS (number and street) PO Box 370230 Denver CO 80237

2. FEC IDENTIFICATION NUMBER C c00556530 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM in the State of (c) 30-Day POST-Election Report for the: X General (30G) Runoff (30R) Special (30S) Election on MM DD YY in the State of CO

5. Covering Period MM / DD / YY 10 / 16 / 2014 through MM / DD / YY 11 / 24 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Chaiken

Signature of Treasurer Lisa Chaiken Date 01 26 2015

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

15020041650

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Stephen Shogan for Senate Committee**

Report Covering the Period: From: <sup>M</sup>10 / <sup>D</sup>16 / <sup>Y</sup>2014 To: <sup>M</sup>11 / <sup>D</sup>24 / <sup>Y</sup>2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))..	7200.00	49272.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	7200.00	49272.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	27282.56	95903.02
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	27282.56	95903.02
8. Cash on Hand at Close of Reporting Period (from Line 27)...	-16982.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)...	118000.00	

**For further information contact:**

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

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

15020041651

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**Stephen Shogan for Senate Committee**

Report Covering the Period: From: <sup>M M</sup> 10 <sup>D D /</sup> 16 <sup>Y Y</sup> 2014 To: <sup>M M</sup> 11 <sup>D D</sup> 24 <sup>Y Y</sup> 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	6250.00	46450.00
(ii) Unitemized .....	950.00	2822.00
(iii) TOTAL of contributions from individuals .	7200.00	49272.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7200.00	49272.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	73000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	73000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	7200.00	122272.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	27282.56	95903.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	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 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	27282.56	95903.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	3100.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7200.00
25. SUBTOTAL (add Line 23 and Line 24)...	10300.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	27282.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	-16982.32

15020041653

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

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

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)  
**Stephen Shogan for Senate Committee**

Full Name (Last, First, Middle Initial) <b>Barb Gallivan</b>			Date of Receipt M M D D / Y Y Y 11 04 2014	
Mailing Address 721 Jacksn St			Transaction ID : SA11AI.4469	
City Denver	State CO	Zip Code 80206	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer retired		Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	1000.00	

Full Name (Last, First, Middle Initial) <b>Sue Hoover Hamblin</b>			Date of Receipt M M D D / Y Y Y 11 04 2014	
Mailing Address 466 Lorroway Dr			Transaction ID : SA11AI.4474	
City Castle Rock	State CO	Zip Code 80108	Amount of Each Receipt this Period 2400.00	
FEC ID number of contributing federal political committee. C				
Name of Employer retired		Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2400.00	

Full Name (Last, First, Middle Initial) <b>Ken Hamblin</b>			Date of Receipt M M D D / Y Y Y 11 04 2014	
Mailing Address 466 Lorroway Dr			Transaction ID : SA11AI.4475	
City Castle Rock	State CO	Zip Code 80108	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer retired		Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Stephen Shogan for Senate Committee**

A. Full Name (Last, First, Middle Initial) <b>Andrew Parker</b>		Date of Receipt M M / D D / Y Y Y 11 04 2014
Mailing Address 5000 e oxford avenue		Transaction ID : SA11AI.4477
City cherry hills village	State CO	
Zip Code 80113		Amount of Each Receipt this Period  250.00 , , .
FEC ID number of contributing federal political committee. C		
Name of Employer orthopedic associates	Occupation surgeon	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date  250.00 , , .	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00 , , .
<b>TOTAL</b> This Period (last page this line number only).....	6250.00 , , .

15020041655

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

**Stephen Shogan for Senate Committee**

<p><b>A. Dash Valley Enterprises</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 466 Lorroway Dr.</p> <p>City Castle Rock State CO Zip Code 80104</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Date of Disbursement</p> <p>M M D D Y Y Y Y</p> <p>11 20 2014</p>
<p>Disbursement For: 2014</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Amount of Each Disbursement this Period</p> <p>2278.78</p> <p>Transaction ID : SB17.4502</p>
<p><b>B. Dash Valley Enterprises</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 466 Lorroway Dr.</p> <p>City Castle Rock State CO Zip Code 80104</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Stephen Shogan for Senate Committee</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District:</p>		<p>Date of Disbursement</p> <p>M M D D Y Y Y Y</p> <p>11 20 2014</p>
<p>Disbursement For: 2014</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Amount of Each Disbursement this Period</p> <p>2278.78</p> <p>Transaction ID : SB17.4506</p>
<p><b>c. Denver Post</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Date of Disbursement</p> <p>M M J D Y Y Y Y</p> <p>11 13 2014</p>
<p>Disbursement For: 2014</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify)</p>		<p>Amount of Each Disbursement this Period</p> <p>10000.00</p> <p>Transaction ID : SB17.4500</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional).....</p>		<p>14557.56</p>
<p><b>TOTAL</b> This Period (last page this line number only).....</p>		<p>.</p>

15020041656

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

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Stephen Shogan for Senate Committee**

**A. Sarah Binder**

Full Name (Last, First, Middle Initial)  
Mailing Address unknown

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 04 / 2014

City denver State CO Zip Code  
Purpose of Disbursement  
Candidate Name

Amount of Each Disbursement this Period  
500.00  
Transaction ID : SB17.4492

004  
Category/ Type

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

State: District:

**B. Kevin Bradshaw**

Full Name (Last, First, Middle Initial)  
Mailing Address 1675 S Marion St

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 06 / 2014

City Denver State CO Zip Code 80210  
Purpose of Disbursement  
Candidate Name

Amount of Each Disbursement this Period  
360.00  
Transaction ID : SB17.4494

004  
Category/ Type

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

State: District:

**c. Dash Valley Enterprises**

Full Name (Last, First, Middle Initial)  
Mailing Address 466 Lorroway Dr.

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 04 / 2014

City Castle Rock State CO Zip Code 80104  
Purpose of Disbursement  
Candidate Name

Amount of Each Disbursement this Period  
5000.00  
Transaction ID : SB17.4491

001  
Category/ Type

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

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... 5860.00

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

15020041657



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 14

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Stephen Shogan for Senate Committee**

Full Name (Last, First, Middle Initial) <b>A. L2</b>		Date of Disbursement M M / Y Y Y Y 11 04 2014
Mailing Address		Amount of Each Disbursement this Period  6435.00 Transaction ID : SB17.4495
City	State Zip Code	
Purpose of Disbursement email lists	Candidate Name	004 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Post Modern Company</b>		Date of Disbursement M M / Y Y Y Y 11 04 2014
Mailing Address		Amount of Each Disbursement this Period  430.00 Transaction ID : SB17.4497
City	State Zip Code	
Purpose of Disbursement	Candidate Name	004 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6865.00
<b>TOTAL</b> This Period (last page this line number only).....	27282.56

15020041658

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4111**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014  
**Stephen Shogan**  Primary  
 Mailing Address  General  
 55 Charlou Circle  Other (specify) ▼

City State ZIP Code  
 Englewood CO 80111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
01 <sup>M</sup> 29 <sup>D</sup> 2014	none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , ,

**SUBTOTALS** This Period This Page (optional)... ▶ , , 20000.00

**TOTALS** This Period (last page in this line only) .. ▶ , ,

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

15020041659

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4113**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Shogan</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 55 Charlou Circle		

City	State	ZIP Code
Englewood	CO	80111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	<sup>M</sup> 03 <sup>D</sup> 20 <sup>Y</sup> 2014	<sup>M</sup> <sup>M</sup> <sup>Y</sup> none <sup>Y</sup>	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , ,

<b>SUBTOTALS</b> This Period This Page (optional)...	25000.00
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<b>TOTALS</b> This Period (last page in this line only) ..	
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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020041660

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4284**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Stephen Shogan**

Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
55 Charlou Circle

City State ZIP Code  
Englewood CO 80111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 04 D 16 Y 2014	none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: , ,

**SUBTOTALS** This Period This Page (optional)... ▶ , , 50000.00

**TOTALS** This Period (last page in this line only) ... ▶ , ,

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

15020041661

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4285**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Shogan</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 55 Charlou Circle	

City	State	ZIP Code
Englewood	CO	80111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000.00	0.00	15000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 21 Y 2014	none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional)...	15000.00
<b>TOTALS</b> This Period (last page in this line only) ..	,

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

15020041662

**SCHEDULE C (FEC Form 3)**

**LOANS**

NAME OF COMMITTEE (In Full) **Stephen Shogan for Senate Committee** Transaction ID : **SC/10.4346**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Stephen Shogan</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 55 Charlou Circle	
City State ZIP Code Englewood CO 80111	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8000.00	0.00	8000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M <sup>M</sup> 06 <sup>M</sup> D <sup>D</sup> 20 <sup>D</sup> Y <sup>Y</sup> 2014 <sup>Y</sup>	M <sup>M</sup> / D <sup>D</sup> none <sup>Y</sup>	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional)...	8000.00
<b>TOTALS</b> This Period (last page in this line only) ..	118000.00

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

15020041663



Retail

**P**

US POSTAGE PAID

**\$5.75**

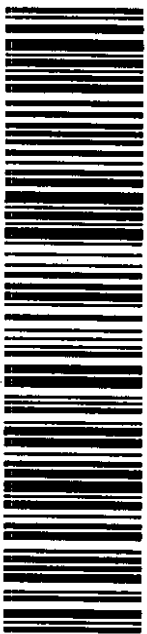
Origin: 80538  
4.90 oz.  
01/28/15  
0757060413-28

1006

**PRIORITY MAIL® 2-DAY**

Expected Delivery Day: 01/28/15

USPS TRACKING NUMBER



9505 5111 4382 5028 8028 56

A CUSTOMS DECLARATION LABEL MAY BE REQUIRED.



PS00001000014

EPI4F July 2013  
OD: 12.5 x 9.5

PRESS FIRMLY TO SEAL

PRIORITY MAIL  
POSTAGE REQUIRED

FROM:

Lisa Chaitman  
6035 E Prairie Pl  
Greenwood Vlg CO 80111

TO:

Chris Whyride

Po Box 77578

Select House of State Office of Public Records

Washington D.C.

20013

SCREENED  
BY THE SENATE  
POST OFFICE

VISIT US AT **USPS.COM**<sup>®</sup>  
ORDER FREE SUPPLIES ONLINE



7991T4002051

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL 1/26/15  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  POSTMARK

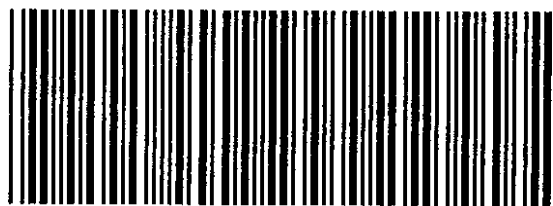
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 1/28/15

15020041665





SEN PATCH



SEN PATCH

15020041666