

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
U.S. HOUSE OF REPRESENTATIVES
14 OCT 20 11 PM 33:22
Office Use Only

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

Watson For Senate

ADDRESS (number and street) 3900 Old Cheney Road #201-131

Check if different than previously reported. (ACC) Lincoln NE 68516

2. **FEC IDENTIFICATION NUMBER** ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00556977 NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
NE 010

4. **TYPE OF REPORT** (Choose One)

- (a) Quarterly Reports:
- April 15 Quarterly Report (Q1)
 - July 15 Quarterly Report (Q2)
 - October 15 Quarterly Report (Q3)
 - January 31 Year-End Report (YE)
 - Termination Report (TER)

(b) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2014 through 09 / 30 / 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 Todd Watson

Signature of Treasurer Todd Watson Date M M / D D / Y Y Y Y
10 / 13 / 2014

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

14021052652

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Watson For Senate

Report Covering the Period: From:

07 / 01 / 2014

To:

09 / 30 / 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))...	6,995.00	29,003.07
(b) Total Contribution Refunds (from Line 20(d)) ..		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	6,995.00	29,003.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	9,203.00	30,773.03
(b) Total Offsets to Operating Expenditures (from Line 14)...		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	9,203.00	30,773.03
8. Cash on Hand at Close of Reporting Period (from Line 27)...	1,144,273.51	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	1,619,973.31	

For further information contact:

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

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

14021052653

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Watson For Senate

Report Covering the Period: From:

07 / 01 / 2014

To:

09 / 30 / 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)...

5,780.00

20,800.07

(ii) Unitemized

1,215.00

3,203.00

(iii) TOTAL of contributions from individuals .

6,995.00

24,003.07

(b) Political Party Committees...

(c) Other Political Committees (such as PACs) ..

(d) The Candidate

5,000.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

6,995.00

29,003.07

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

13. LOANS:

(a) Made or Guaranteed by the Candidate...

6,197.31

116,197.31

(b) All Other Loans...

(c) TOTAL LOANS (add Lines 13(a) and (b))...

6,197.31

116,197.31

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

13,192.31

145,200.38

14021052654

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	9,203. ⁰⁰	30,773. ⁰³
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		5,857. ⁰⁰
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		5,857. ⁰⁰
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs) ..		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	9,203. ⁰⁰	36,630. ⁰³

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	110,438. ⁰⁴
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	13,192. ³¹
25. SUBTOTAL (add Line 23 and Line 24)...	123,630. ³⁵
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	9,203. ⁰⁰
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	114,427. ³⁵

14021052655

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

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

FOR LINE NUMBER:		PAGE		OF	
(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"/> 13
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<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)

Full Name (Last, First, Middle Initial)

A. Jenay Bayer

Mailing Address

3409 Golf View Drive

City

Norfolk

State

NE

Zip Code

68701

FEC ID number of contributing federal political committee.

C

Name of Employer

Lincoln Summit Falls

Occupation

Manager Member

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

7,500.00

Date of Receipt

09 / 30 / 2014

Amount of Each Receipt this Period

7,500.00

Full Name (Last, First, Middle Initial)

B. Davis Amos

Mailing Address

2630 Scott Avenue

City

Lincoln

State

NE

Zip Code

68508

FEC ID number of contributing federal political committee.

C

Name of Employer

Futures One

Occupation

Salesman

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

3,600.00

Date of Receipt

09 / 30 / 2014

Amount of Each Receipt this Period

2,600.00

Full Name (Last, First, Middle Initial)

C. Tollman, Justin, M

Mailing Address

4080 Horseshoe Pl

City

Grand Island

State

NE

Zip Code

68903

FEC ID number of contributing federal political committee.

C

Name of Employer

Nutrient Advisers

Occupation

Business Manager

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

2,200.00

Date of Receipt

09 / 15 / 2014

Amount of Each Receipt this Period

1,000.00

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

3,450.00

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

3,450.00

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

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

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NAME OF COMMITTEE (In Full)

A. Doeden, Lisa, J
 Full Name (Last, First, Middle Initial)
 Mailing Address
Po Box 9022
 City Warren State MI Zip Code 48343
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation Homemaker
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
07 / 20 / 2014
 Amount of Each Receipt this Period
250.00

B. Parr, Jeanette, A
 Full Name (Last, First, Middle Initial)
 Mailing Address
1760 N. Overland
 City Juniata State NE Zip Code 68955-2154
 FEC ID number of contributing federal political committee. C
 Name of Employer None Occupation Retired
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 380.00

Date of Receipt
 MM / DD / YYYY
09 / 28 / 2014
 Amount of Each Receipt this Period
380.00

C. Bayer, Larry, D
 Full Name (Last, First, Middle Initial)
 Mailing Address
3409 Golf View Drive
 City Norfolk State NE Zip Code 68701
 FEC ID number of contributing federal political committee. C
 Name of Employer Lincoln Summit Falls Occupation Managing Member
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2014
 Amount of Each Receipt this Period
250.00

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

880.00

14021052657

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

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. <u>Tollman Justin M</u>		Date of Receipt MM/DD/YYYY <u>08/28/2014</u>
Mailing Address <u>4080 Horseshoe Pl</u>		Amount of Each Receipt this Period <u>50.00</u>
City <u>Grand Island</u>	State Zip Code <u>NE 68903</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>50.00</u>
Name of Employer <u>Nutrient Advisors</u>	Occupation <u>Business Manager</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>2.20.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Gary Schulte</u>		Date of Receipt MM/DD/YYYY <u>08/31/2014</u>
Mailing Address <u>2807 Lakewood Circle</u>		Amount of Each Receipt this Period <u>800.00</u>
City <u>Grand Island</u>	State Zip Code <u>NE 68801</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>800.00</u>
Name of Employer <u>Gr.I. Free Church</u>	Occupation <u>Pastor</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>8.00.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Shada Dough</u>		Date of Receipt MM/DD/YYYY <u>09/21/2014</u>
Mailing Address <u>5 Camelot Way</u>		Amount of Each Receipt this Period <u>600.00</u>
City <u>Kearney</u>	State Zip Code <u>NE 68845</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>600.00</u>
Name of Employer <u>Living Faith Fellowship</u>	Occupation <u>Pastor</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>600.00</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>1,450.00</u>
TOTAL This Period (last page this line number only).....	<u>5,780.00</u>

14021052658

**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 OF	
	<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)
Watson for Senate Campaign

A. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address: **1601 Willow Road**

City: **Menlo Park** State: **CA** Zip Code: **94025**

Purpose of Disbursement: **Advertising** Category/Type: **004**

Candidate Name: **Todd Watson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Both**

State: **NE** District:

Date of Disbursement: **09 / 30 / 2014**

Amount of Each Disbursement this Period: **816.19**

B. Google

Full Name (Last, First, Middle Initial)

Mailing Address: **1600 Amphitheatre Parkway**

City: **Mountain View** State: **CA** Zip Code: **94043**

Purpose of Disbursement: **Advertising** Category/Type: **004**

Candidate Name: **Todd Watson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Both**

State: **NE** District:

Date of Disbursement: **09 / 30 / 2014**

Amount of Each Disbursement this Period: **869.53**

C. Eagle Printing

Full Name (Last, First, Middle Initial)

Mailing Address: **1340 N Street**

City: **Lincoln** State: **NE** Zip Code: **68508**

Purpose of Disbursement: **Advertising** Category/Type: **004**

Candidate Name: **Todd Watson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Both**

State: **NE** District:

Date of Disbursement: **09 / 11 / 2014**

Amount of Each Disbursement this Period: **494.25**

SUBTOTAL of Disbursements This Page (optional)..... **2,179.97**

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

14021052659

**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 OF	
	<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)
Watson for Senate Campaign

A. Secretary of State - Nebraska

Mailing Address: PO Box 94608

City: Lincoln State: NE Zip Code: 68509-4608

Purpose of Disbursement: Filing Fees

Candidate Name: Todd Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) Both

State: NE District: -

Date of Disbursement: 07/10/2014

Amount of Each Disbursement this Period: 1,740.00

Category/Type: 0.01

B. Infinity Promotions

Mailing Address: 7130 S 42nd Street

City: Lincoln State: NE Zip Code: 68516

Purpose of Disbursement: Campaign Materials

Candidate Name: Todd Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NE District: -

Date of Disbursement: 09/23/2014

Amount of Each Disbursement this Period: 553.46

Category/Type: 0.06

C. Art Fx

Mailing Address: 7400 Crosslake Lane

City: Lincoln State: NE Zip Code: 68516

Purpose of Disbursement: Volunteer Supplies

Candidate Name: Todd Watson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NE District: -

Date of Disbursement: 09/04/2014

Amount of Each Disbursement this Period: 211.86

Category/Type: 0.06

SUBTOTAL of Disbursements This Page (optional)..... 2,505.32

TOTAL This Period (last page this line number only)..... 2,505.32

14021052660

**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	OF
	<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)

Full Name (Last, First, Middle Initial) A. Schultes Gary		Date of Disbursement MM/DD/YYYY 08/31/2014
Mailing Address 2807 Lakewood Circle		Amount of Each Disbursement this Period 800.00
City Grand Island	State NE	
Zip Code 68801		Category/Type 0.0.2
Purpose of Disbursement Lodging - Gift in kind		
Candidate Name Todd Watson		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: -	

Full Name (Last, First, Middle Initial) B. Shala Doug		Date of Disbursement MM/DD/YYYY 08/21/2014
Mailing Address 5 Camelot Way		Amount of Each Disbursement this Period 600.00
City Kearney	State NE	
Zip Code 68845		Category/Type 0.0.2
Purpose of Disbursement Lodging - Gift in kind		
Candidate Name Todd Watson		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: -	

Full Name (Last, First, Middle Initial) C. Nebraska State Fair		Date of Disbursement MM/DD/YYYY 08/15/2014
Mailing Address 1811 W 2nd St #440		Amount of Each Disbursement this Period 775.00
City Grand Island	State NE	
Zip Code 68803		Category/Type 0.0.7
Purpose of Disbursement Brother Fair		
Candidate Name Todd Watson		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: -	

SUBTOTAL of Disbursements This Page (optional).....	2,175.00
TOTAL This Period (last page this line number only).....	6,860.29

14021052661

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE OF

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Watson For Senate

LOAN SOURCE Full Name (Last, First, Middle Initial)
Watson, Todd F

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
2855 S 70th #200

City State ZIP Code
Lincoln NE 68506

Original Amount of Loan
116,197.31

Cumulative Payment To Date
0.00

Balance Outstanding at Close of This Period
116,197.31

TERMS

Date Incurred: *06/30/2014* Date Due: *01/27/2017* Interest Rate: *0.00* % (apr)

Secured: Yes No

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

1. Full Name (Last, First, Middle Initial) *Watson Todd F Home Equity LOC* Name of Employer *Various*

Mailing Address *2855 S 70th #200* Occupation *Business Owner*

City State ZIP Code *Lincoln NE 68506* Amount Guaranteed Outstanding: *110,000.00*

2. Full Name (Last, First, Middle Initial) *Watson Todd F* Name of Employer *Various*

Mailing Address *2855 S 70th #200* Occupation *Business Owner*

City State ZIP Code *Lincoln NE 68506* Amount Guaranteed Outstanding: *6,197.31*

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)..... *116,197.31*

TOTALS This Period (last page in this line only).. *116,197.31*

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

14021052662

son for Senate
, Old Cheney Rd # 200-131
coln, NE 68516

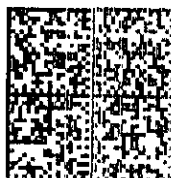
SCREENED
BY THE SENATE
POST OFFICE

CERTIFIED MAIL™



7008 1140 0003 6822 649*

Secretary of the Senate
Office of Public Records
Po Box 77578
Washington, DC 20013-7578



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10/15/2014
Mailed From 68506
US POSTAGE

215181250120971

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 **10/15/14**

USPS PRIORITY MAIL _____
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

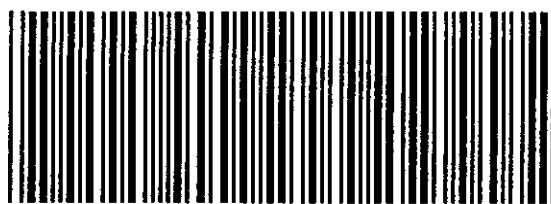
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **MN** DATE PREPARED **10/20/14**

14021052664



SEN PATCH



SEN PATCH

14021052665