

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

LOUIE MINOR FOR CONGRESS

ADDRESS (number and street)

PO BOX 82

Check if different than previously reported. (ACC)

BELTON

TX

76513

2. FEC IDENTIFICATION NUMBER ▼

C C00546606

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TX

31

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

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 Anna Marie Vazquez

Signature of Treasurer Anna Marie Vazquez

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
LOUIE MINOR FOR CONGRESS

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

	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))....	4021.00	4021.00
(b) Total Contribution Refunds (from Line 20(d))	50.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3971.00	3971.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6040.90	6040.90
(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)).....	6040.90	6040.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-1769.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	300.00	

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 3 (Revised 12/2003)

Write or Type Committee Name

LOUIE MINOR FOR CONGRESS

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

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).....	1200.00	1200.00
(ii) Unitemized.....	2316.00	2316.00
(iii) TOTAL of contributions from individuals ▶	3516.00	3516.00
(b) Political Party Committees.....	500.00	500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	5.00	5.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4021.00	4021.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	300.00	300.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	300.00	300.00
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)..... ▶	4321.00	4321.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6040.90	6040.90
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	50.00	50.00
(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)).....	50.00	50.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6090.90	6090.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4321.00
25. SUBTOTAL (add Line 23 and Line 24).....	4321.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6090.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-1769.90

**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 16
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LOUIE MINOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sandra Blankenship

Mailing Address 1440 Live Oak Cemetery Rd.

City State Zip Code
Killeen TX 76542

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

Name of Employer Occupation
Unknown Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
 500.00
 Contribution

B. Full Name (Last, First, Middle Initial)
David Fernandez

Mailing Address 1508 Loop 363

City State Zip Code
Temple TX 76504

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : SA11AI.4408

Amount of Each Receipt this Period
 250.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Louie Minor Sr.

Mailing Address 2118 W. Hwy. 190

City State Zip Code
Belton TX 76513

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

Name of Employer Occupation
Self Counstruction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 02 2014

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period
 200.00
 Contribution

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

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

950.00

**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 6 OF 16
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LOUIE MINOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Odle

Mailing Address 525 G. Ste. SE 4

City Washington State DC Zip Code 20003

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

Name of Employer Government Occupation USDA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11Al.4151

Amount of Each Receipt this Period
 Contribution 250.00

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

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

Amount of Each Receipt this Period

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

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

250.00

1200.00

**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 7 OF 16
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LOUIE MINOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL NURSES UNITED

Mailing Address 8630 FENTON STREET SUITE 1100

City State Zip Code
SILVER SPRING MD 20919

FEC ID number of contributing federal political committee. **C** C70005376

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11B.4116

Amount of Each Receipt this Period
Contribution
500.00

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

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

Amount of Each Receipt this Period

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

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

500.00

500.00

**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 8 OF 16
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LOUIE MINOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOUIE JR MINOR Jr.

Mailing Address **PO BOX 82**

City **BELTON** State **TX** Zip Code **76513**

FEC ID number of contributing federal political committee. **C H4TX31040**

Name of Employer **Army Reserves** Occupation **Officer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5.00

Date of Receipt
 / /

Transaction ID : SA11D.4164

Amount of Each Receipt this Period

Contribution

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
 / /

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
 / /

Amount of Each Receipt this Period

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

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

**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 9 OF 16
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LOUIE MINOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Louie Minor Sr.

Mailing Address 2118 W. Hwy. 190

City Belton State TX Zip Code 76513

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

Name of Employer Self Occupation Counstruction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA13A.4396

Amount of Each Receipt this Period
300.00

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

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

Amount of Each Receipt this Period

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

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

300.00

300.00

**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 10 OF 16			
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 295.66 Transaction ID : SB17.4237
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Campaign Phone	Category/ Type 001
Candidate Name LOUIE MINOR FOR CONGRESS	Office Sought: <input checked="" 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: TX District: 31	

Full Name (Last, First, Middle Initial) B. Bell County Democrats		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1808 East Rancier Ave.		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4185
City Killeent	State TX	
Zip Code 76541	Purpose of Disbursement Rental Fees	Category/ Type 001
Candidate Name LOUIE MINOR FOR CONGRESS	Office Sought: <input checked="" 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: TX District: 31	

Full Name (Last, First, Middle Initial) c. Bell County Democrats		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1808 East Rancier Ave.		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4189
City Killeent	State TX	
Zip Code 76541	Purpose of Disbursement Rental Fees	Category/ Type 001
Candidate Name LOUIE MINOR FOR CONGRESS	Office Sought: <input checked="" 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: TX District: 31	

SUBTOTAL of Disbursements This Page (optional).....	1395.66
TOTAL This Period (last page this line number only).....	

**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 11 OF 16			
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bell County Democrats		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1808 East Rancier Ave.		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.4191
City Killeen	State TX	
Purpose of Disbursement Rental Fees		Category/ Type 001
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

Full Name (Last, First, Middle Initial) B. CEFCO		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 1007 N. WS Young		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.4273
City Killeen	State TX	
Purpose of Disbursement Fuel		Category/ Type 002
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

Full Name (Last, First, Middle Initial) C. CEFCO		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1007 N. WS Young		Amount of Each Disbursement this Period 36.00 Transaction ID : SB17.4280
City Killeen	State TX	
Purpose of Disbursement Fuel		Category/ Type 002
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

SUBTOTAL of Disbursements This Page (optional).....	596.00
TOTAL This Period (last page this line number only).....	

**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 12 OF 16	
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CEFCO		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1007 N. WS Young		Amount of Each Disbursement this Period 44.50 Transaction ID : SB17.4286
City Killeen	State TX	
Zip Code 76542	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

Full Name (Last, First, Middle Initial) B. Corner Store		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1009 Loope 121		Amount of Each Disbursement this Period 55.00 Transaction ID : SB17.4289
City Belton	State TX	
Zip Code 76513	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

Full Name (Last, First, Middle Initial) c. Corner Store		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 1009 Loope 121		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4290
City Belton	State TX	
Zip Code 76513	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX	District: 31	

SUBTOTAL of Disbursements This Page (optional).....	179.50
TOTAL This Period (last page this line number only).....	

**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 13 OF 16	
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Corner Store		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1009 Loope 121		Amount of Each Disbursement this Period 41.00 Transaction ID : SB17.4293
City Belton State TX Zip Code 76513	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX District: 31		

Full Name (Last, First, Middle Initial) B. Custom Tees		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 2100 South W.S. Young Drive		Amount of Each Disbursement this Period 215.42 Transaction ID : SB17.4184
City Killeen State TX Zip Code 76541	Purpose of Disbursement T-shirts 006 Category/Type	
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX District: 31		

Full Name (Last, First, Middle Initial) c. Custom Tees		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 2100 South W.S. Young Drive		Amount of Each Disbursement this Period 240.32 Transaction ID : SB17.4186
City Killeen State TX Zip Code 76541	Purpose of Disbursement Business Cards 006 Category/Type	
Candidate Name LOUIE MINOR FOR CONGRESS		
Office Sought: <input checked="" 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: TX District: 31		

SUBTOTAL of Disbursements This Page (optional).....	496.74
TOTAL This Period (last page this line number only).....	

**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 14 OF 16			
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Custom Tees		M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 2100 South W.S. Young Drive		Amount of Each Disbursement this Period
City Killeen State TX Zip Code 76541	Purpose of Disbursement Fuel	43.50
Candidate Name LOUIE MINOR FOR CONGRESS	Category/Type 002	Transaction ID : SB17.4272
Office Sought: <input checked="" 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: TX District: 31		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Custom Tees		M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 2100 South W.S. Young Drive		Amount of Each Disbursement this Period
City Killeen State TX Zip Code 76541	Purpose of Disbursement Fuel	35.00
Candidate Name LOUIE MINOR FOR CONGRESS	Category/Type 002	Transaction ID : SB17.4292
Office Sought: <input checked="" 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: TX District: 31		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Sonic Print		M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 5018 Tampa W. Blvd.		Amount of Each Disbursement this Period
City Tampa State FL Zip Code 33634	Purpose of Disbursement Campaign Flyers	290.11
Candidate Name LOUIE MINOR FOR CONGRESS	Category/Type 006	Transaction ID : SB17.4239
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2001 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TX District: 31		

SUBTOTAL of Disbursements This Page (optional).....	368.61
TOTAL This Period (last page this line number only).....	

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 15 OF 16			
	<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)
LOUIE MINOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sonic Print		Date of Disbursement
Mailing Address 5018 Tampa W. Blvd.		M M / D D / Y Y Y Y 08 / 13 / 2014
City Tampa	State FL	Zip Code 33634
Purpose of Disbursement Campaign Materials	Category/ Type 003	Amount of Each Disbursement this Period 332.41
Candidate Name LOUIE MINOR FOR CONGRESS	Transaction ID : SB17.4270	
Office Sought: <input checked="" 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: TX District: 31		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
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:		

SUBTOTAL of Disbursements This Page (optional).....	332.41
TOTAL This Period (last page this line number only).....	3368.92

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)

Transaction ID : SC/10.4396

LOUIE MINOR FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2014

Louie Minor Sr.

Primary

General

Other (specify) ▼

Mailing Address

2118 W. Hwy. 190

City

State

ZIP Code

Belton

TX

76513

Original Amount of Loan

300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

02

2014

12/04/14

0.00

% (apr)

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:

SUBTOTALS This Period This Page (optional)..... ▶

300.00

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

300.00

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