

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

COTTON FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 379

Check if different than previously reported. (ACC)

DARDANELLE

AR

72834

2. **FEC IDENTIFICATION NUMBER** ▼

C C00499988

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

AR

04

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 BRADLEY T CRATE

Signature of Treasurer BRADLEY T CRATE

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
COTTON FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 27 / 2012 To: M M / D D / Y Y Y Y 12 / 31 / 2012

	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))....	9720.00	11467.59
(b) Total Contribution Refunds (from Line 20(d))	0.00	3089.54
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9720.00	8378.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	113402.86	158657.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	504.15	504.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	112898.71	158152.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	118350.97	
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).....	0.00	

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

COTTON 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).....	7000.00	8608.05
(ii) Unitemized.....	220.00	359.54
(iii) TOTAL of contributions from individuals ▶	7220.00	8967.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9720.00	11467.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	504.15	504.15
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)..... ▶	10224.15	11971.74

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	113402.86	158657.13
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	3089.54
(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	3089.54
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	113402.86	161746.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	221529.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10224.15
25. SUBTOTAL (add Line 23 and Line 24).....	231753.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	113402.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	118350.97

**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 5 OF 29
	<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	

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)
COTTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RANDY MCCASLIN

Mailing Address P.O. BOX 642

City State Zip Code
CLINTON AR 72031

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

Name of Employer Occupation
ARKANSAS TELEPHONE COMPANY BOARD MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : SA11A1.18993

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
LESLEY E NELMS

Mailing Address 154 ASHLEY ROAD

City State Zip Code
MONTROSE AR 71658

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

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SA11A1.18991

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
LESLEY E NELMS

Mailing Address 154 ASHLEY ROAD

City State Zip Code
MONTROSE AR 71658

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

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2012

Transaction ID : SA11A1.19001

Amount of Each Receipt this Period
-2500.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

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

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

7000.00

**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 29
	<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)
COTTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LESLEY E NELMS

Mailing Address 154 ASHLEY ROAD

City MONTROSE State AR Zip Code 71658

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

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2012

Transaction ID : SA11AI.19002

Amount of Each Receipt this Period
 2500.00

REDESIGNATION TO GENERAL

[MEMO ITEM]

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).....

0.00

7000.00

**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 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COTTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2012

Transaction ID : SA11C.18998

Amount of Each Receipt this Period
2500.00
REDESIGNATION REQUESTED

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2012

Transaction ID : SA11C.20148

Amount of Each Receipt this Period
-2500.00
Redesignate: REDESIGNATION REQUESTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2012

Transaction ID : SA11C.20149

Amount of Each Receipt this Period
2500.00
Redesignated to Primary 2014
[MEMO ITEM]

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

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

2500.00

**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 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COTTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 16 2012

Transaction ID : SA11C.18985

Amount of Each Receipt this Period
 -5000.00

REATTRIBUTED TO P2014, ORIGINAL CONTRIBUTION 11/2/12
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 520 N. NORTHWEST HIGHWAY

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 16 2012

Transaction ID : SA11C.18986

Amount of Each Receipt this Period
 5000.00

REATTRIBUTED FROM G2012, ORIGINAL CONTRIBUTION 11/2/12
[MEMO ITEM]

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).....

0.00

2500.00

**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 9 OF 29
	<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)
COTTON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ONMESSAGE INC.

Mailing Address 2130 PRIEST BRIDGE DR.
#11

City State Zip Code
CROFTON MD 21114

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
504.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2012

Transaction ID : SA14.18999

Amount of Each Receipt this Period
504.15

REFUND: PLACED MEDIA

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 M / D 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 M / D 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).....

504.15

504.15

**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 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1200 12TH AVENUE SOUTH, SUITE 1200		Amount of Each Disbursement this Period 289.00 Transaction ID : SB17.18871
City SEATTLE State WA Zip Code 98144	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1200 12TH AVENUE SOUTH, SUITE 1200		Amount of Each Disbursement this Period 18.45 Transaction ID : SB17.18872
City SEATTLE State WA Zip Code 98144	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. APPLE STORES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 10500 NORTH DE ANZA BOULEVARD		Amount of Each Disbursement this Period 458.85 Transaction ID : SB17.18873
City CUPERTINO State CA Zip Code 95014	Purpose of Disbursement OFFICE EQUIPMENT PURCHASE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	766.30
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 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. APPLE STORES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 10500 NORTH DE ANZA BOULEVARD		Amount of Each Disbursement this Period 174.65 Transaction ID : SB17.18874
City CUPERTINO State CA Zip Code 95014	Purpose of Disbursement OFFICE EQUIPMENT PURCHASE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. APPLE STORES		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 10500 NORTH DE ANZA BOULEVARD		Amount of Each Disbursement this Period 431.84 Transaction ID : SB17.18875
City CUPERTINO State CA Zip Code 95014	Purpose of Disbursement OFFICE EQUIPMENT PURCHASE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 10802 EXECUTIVE CENTER DR		Amount of Each Disbursement this Period 127.93 Transaction ID : SB17.18876
City LITTLE ROCK State AR Zip Code 72211	Purpose of Disbursement MOBILE PHONE EXPENSE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	734.42
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 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELIZA BAKER		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 831 NEAL DRIVE		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.18844
City ALEXANDRIA	State VA	
Zip Code 22308	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BELLWETHER CONSULTING GROUP		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 1100 G STREET NW SUITE 800		Amount of Each Disbursement this Period 1515.85 Transaction ID : SB17.18851
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.18887
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEETING EXPENSE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7015.85
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 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.18888
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement MEETING EXPENSE		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 27.52 Transaction ID : SB17.18889
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement TRAVEL: FOOD		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 52.12 Transaction ID : SB17.18890
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement MEETING EXPENSE		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	379.64
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 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL SUITES			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 200 C ST SE			Amount of Each Disbursement this Period 209.54 Transaction ID : SB17.18884
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. TOM COTTON			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2012
Mailing Address P.O. BOX 379			Amount of Each Disbursement this Period 853.86 Transaction ID : SB17.18841
City DARDANELLE	State AR	Zip Code 72834	
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. DOUG C COUTTS			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 414 SKYHILL RD			Amount of Each Disbursement this Period 50000.00 Transaction ID : SB17.18842
City ARLINGTON	State VA	Zip Code 22314	
Purpose of Disbursement OPERATIONAL & MANAGEMENT CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	51063.40
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 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DARDANELLE ADVERTISING AND PRINTING			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 115 N FRON STREET			Amount of Each Disbursement this Period 44.76	
City DARDANELLE	State AR	Zip Code 72834	Transaction ID : SB17.18896	
Purpose of Disbursement PRINTING AND DESIGN SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DIAMOND STATE CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012	
Mailing Address 3430 IRBY DRIVE NO. 1611			Amount of Each Disbursement this Period 10000.00	
City CONWAY	State AR	Zip Code 72034	Transaction ID : SB17.18853	
Purpose of Disbursement POLLING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. DONEHUE DIRECT			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012	
Mailing Address PO BOX 7431			Amount of Each Disbursement this Period 5000.00	
City COLUMBIA	State SC	Zip Code 29202	Transaction ID : SB17.18854	
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	15044.76
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 16 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DONEHUE DIRECT		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address PO BOX 7431		Amount of Each Disbursement this Period 5274.13 Transaction ID : SB17.18855
City COLUMBIA	State SC	
Zip Code 29202	Purpose of Disbursement DIGITAL CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DOUBLE TREE HOTELS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 424 W MARKHAM ST		Amount of Each Disbursement this Period 211.49 Transaction ID : SB17.18898
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. EXXON MOBIL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 201 UNION STREET		Amount of Each Disbursement this Period 51.02 Transaction ID : SB17.18903
City DARDANELLE	State AR	
Zip Code 72834	Purpose of Disbursement TRAVEL: FUEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5536.64
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 17 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EZ MART			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 3401 EAST 9TH STREET			Amount of Each Disbursement this Period 46.72	
City TEXARKANA	State AR	Zip Code 71854	Transaction ID : SB17.18900	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. EZ MART			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 3401 EAST 9TH STREET			Amount of Each Disbursement this Period 50.11	
City TEXARKANA	State AR	Zip Code 71854	Transaction ID : SB17.18901	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. EZ MART			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 3401 EAST 9TH STREET			Amount of Each Disbursement this Period 30.30	
City TEXARKANA	State AR	Zip Code 71854	Transaction ID : SB17.18902	
Purpose of Disbursement TRAVEL: FUEL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	127.13
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 18 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 3875 AIRWAYS MODULE H3 DEPT 4634		Amount of Each Disbursement this Period -0.11 Transaction ID : SB17.18904
City MEMPHIS State TN Zip Code 38116	Category/Type	
Purpose of Disbursement CREDIT: DELIVERY SERVICES	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. I360, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address PO BOX 37046		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.18856
City BALTIMORE State MD Zip Code 21297-3046	Category/Type	
Purpose of Disbursement DATA MANAGEMENT SERVICES	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VANESSA MOODY		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 11901 PLEASANT RIDGE RD		Amount of Each Disbursement this Period 2700.00 Transaction ID : SB17.18846
City LITTLE ROCK State AR Zip Code 72223	Category/Type	
Purpose of Disbursement FIELD CONSULTING	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3199.89
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 19 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LESLEY E NELMS		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 154 ASHLEY ROAD		Amount of Each Disbursement this Period 6452.00 Transaction ID : SB17.18845
City MONTROSE State AR Zip Code 71658	Purpose of Disbursement FIELD CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 56.12 Transaction ID : SB17.18859
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 4.25 Transaction ID : SB17.18860
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6512.37
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 20 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 144 SECOND STREET 1ST FLOOR		Amount of Each Disbursement this Period 212.50 Transaction ID : SB17.18861
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 7436.87 Transaction ID : SB17.18984
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SOUTHERN ARKANSAS UNIVERSITY TECH		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address PO BOX 3499		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.18865
City CAMDEN State AR Zip Code 71711	Purpose of Disbursement EMPLOYEE TRAINING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8449.37
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 21 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18935
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18936
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18937
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	289.74
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 22 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18938
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18939
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18940
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	289.74
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 23 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18941
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18942
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18943
City HOT SPRINGS	State AR	Zip Code 71901	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	289.74
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 24 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58	
City HOT SPRINGS	State AR	Zip Code 71901	Transaction ID : SB17.18944	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 96.58	
City HOT SPRINGS	State AR	Zip Code 71901	Transaction ID : SB17.18945	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012	
Mailing Address 305 MALVERN AVE			Amount of Each Disbursement this Period 102.01	
City HOT SPRINGS	State AR	Zip Code 71901	Transaction ID : SB17.18946	
Purpose of Disbursement TRAVEL: LODGING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	295.17
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 25 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 193.16 Transaction ID : SB17.18947
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 193.16 Transaction ID : SB17.18948
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 193.16 Transaction ID : SB17.18949
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	579.48
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 26 OF 29		
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 221.69 Transaction ID : SB17.18950
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 3290.79 Transaction ID : SB17.18951
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 96.58 Transaction ID : SB17.18952
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3609.06
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 27 OF 29	
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE AUSTIN HOTEL		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 305 MALVERN AVE		Amount of Each Disbursement this Period 96.58
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement TRAVEL: LODGING	Transaction ID : SB17.18953
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE PEABODY		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 200 WEST MARKHAM ST		Amount of Each Disbursement this Period 355.52
City LITTLE ROCK	State AR	
Zip Code 72201	Purpose of Disbursement TRAVEL: LODGING	Transaction ID : SB17.18956
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UNISOURCE DIRECT, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2012
Mailing Address PO BOX 82		Amount of Each Disbursement this Period 5462.85
City WATERTOWN	State WI	
Zip Code 53094	Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE	Transaction ID : SB17.18868
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5914.95
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 28 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 4000 E. SKY HARBOR BLVD		Amount of Each Disbursement this Period -192.60
City PHOENIX State AZ Zip Code 85281	Purpose of Disbursement CREDIT: TRAVEL: AIR	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.18968
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 4000 E. SKY HARBOR BLVD		Amount of Each Disbursement this Period 236.80
City PHOENIX State AZ Zip Code 85281	Purpose of Disbursement TRAVEL: AIR	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.18970
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 4000 E. SKY HARBOR BLVD		Amount of Each Disbursement this Period 116.00
City PHOENIX State AZ Zip Code 85281	Purpose of Disbursement TRAVEL: AIR	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.18971
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	160.20
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 29 OF 29			
	<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)
COTTON FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 4000 E. SKY HARBOR BLVD		Amount of Each Disbursement this Period 192.60 Transaction ID : SB17.18972
City PHOENIX State AZ Zip Code 85281	Purpose of Disbursement TRAVEL: AIR	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 4000 E. SKY HARBOR BLVD		Amount of Each Disbursement this Period 236.80 Transaction ID : SB17.18973
City PHOENIX State AZ Zip Code 85281	Purpose of Disbursement TRAVEL: AIR	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 140.80 Transaction ID : SB17.18934
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	570.20
TOTAL This Period (last page this line number only).....	110828.05