Image# 14961649665 PAGE 1 / 11

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL OX	or Other Than An A	uthorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Healthcare Freedom Fu	ınd		
ADDRESS (number and street)	PO Box 2485		
Check if different			
than previously reported. (ACC)	Springfield		VA 22152
2. FEC IDENTIFICATION NU	MBER ▼	CITY	STATE ▲ ZIP CODE ▲
C C00528414	3.	IS THIS REPORT X NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	Teb 20 (M2) May 20 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q		xpr 20 (M4) X Jul 20 (M	
July 15 Quarterly Report (Q2	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE	E) Elec	etion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	` /	Runoff (30R) Special (30S)
Termination Report (TER)	Elec	etion on	in the State of
5. Covering Period 06	01 2014		6 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	s Report and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	Joe Grandy		
Signature of Treasurer Joe Gr	randy	[Electronically Filed]	Date 07 / 17 / 2014
NOTE: Submission of false, errone	ous, or incomplete informa	tion may subject the person sign	ing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Healthcare Freedom Fund 06 2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 57583.50 January 1, 2014 (b) Cash on Hand at 45965.78 Beginning of Reporting Period..... 112100.00 24500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 70465.78 169683.50 6(a) and 6(c) for Column B)..... 42964.50 142182.22 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 27501.28 27501.28 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Healthcare Freedom Fund

Report Covering the Period: From: 06	01 2014 To	o: 06 30 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	0.00	3000.00
(i) Norm200 (000 001100010 71)		
(ii) Unitemized	0.00	1600.00
(iii) TOTAL (add	0.00	4600.00
Lines 11(a)(i) and (ii)▶	0.00	4000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	24500.00	107500.00
(such as PACs)(d) Total Contributions (add Lines	2.000.00	107300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	24500.00	112100.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
3. All Loans Received		0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
F		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	24500.00	112100.00
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	24500.00	112100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo Tollou	Outched Tear to Bate
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	10564.50	44982.22
(c) Total Operating Expenditures	10564.50	44982.22
(add 21(a)(i), (a)(ii), and (b))▶ . Transfers to Affiliated/Other Party	10304.30	44302.22
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	32400.00	97200.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	, 0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	42964.50	142182.22
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	42964.50	142182.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	24500.00	112100.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24500.00	112100.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10564.50	44982.22
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	10564.50	44982.22

SCHEDULE A (FEC Form 3X)	Use	e separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 11 (check only one)
TEMIZED RECEIPTS	I .	each category of the ailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund			
Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF DERMATOLOGY ASSOCI Mailing Address 1445 NEW YORK AVENUE NV STE 800 City WASHINGTON FEC ID number of contributing federal political committee.	V State Z	ip Code 0005	Date of Receipt M M
Name of Employer Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF PREFERRED PROV Mailing Address 222 SOUTH FIRST STREET S City LOUISVILLE FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial)	JITE 303 State Z	ip Code 0202	Date of Receipt 06 30 2014 Transaction ID: SA11C.4501 Amount of Each Receipt this Period 1500.00
AMERICAN COLLEGE OF RADIOLOGY ASS Mailing Address 1891 PRESTON WHITE DRIV City RESTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Z	ip Code 0191 59	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		·····	9500.00

30	CHEDULE A (FEC Form 3X)	1		FOF	R LINE	MH	MRFF	3:	PAG	aF	7 OF	11
	,		Use separate schedule(s)	_	(check only one)							
I	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	X	11c		12	
					13	П	14		15		16	17
	ly information copied from such Reports and State for commercial purposes, other than using the r											
\	NAME OF COMMITTEE (In Full)											
\rangle	Healthcare Freedom Fund											
۹.	Full Name (Last, First, Middle Initial) ASSOCIATED GENERAL CONTRACTORS OF	AMERICA	POLITICAL ACTION COMMITTE	E ı	Date of	Re	ceipt					
	Mailing Address 2300 WILSON BLVD. SUITE 400				м = м 06	/	1		/		014	
	City	State	Zip Code		Trans	acti	on ID	: S	A11C.	4491		
	ARLINGTON	VA	22201	_ /	Amount	of	Each	Red	ceipt t	his F	Period	
	FEC ID number of contributing federal political committee.	C coo	0082917				7		7		2500.0	0
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		2500.00									
	Other (specify)		2000.00									
 3.	Full Name (Last, First, Middle Initial) GROOM LAW GROUP, CHARTERED F	POLITICA	L ACTION COMMITTEE		Date of	Re	ceipt					
	Mailing Address 1701 PENNSYLVANIA AVENUE			٦,	M = M	1	D	D	/ Y	Y	YYY	-
					06		0	2		20	014	
	City	State	Zip Code		Trans							
	WASHINGTON	DC	20006	- '	Amount	of	Each	Red	ceipt t	his F	eriod	
	FEC ID number of contributing federal political committee.	C coo	394775				,		7		1000.0	0
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General											
	Other (specify) ▼		1000.00									
Э.	Full Name (Last, First, Middle Initial) I.P.H.F.H.A. INC. POLITICAL ACTI	ON COM	MITTEE INC.		Date of	Re	ceipt					
	Mailing Address 7829 E. ROCKHILL #201				M M M	/	2	.5	/ 🖺)14	1
	City	State	Zip Code		Trans	acti			A11C	4497	7	
	WICHITA	KS	67206		Amount	of	Each	Red	eipt t	his F	Period	
	FEC ID number of contributing federal political committee.	C cod	0251447				,		7		1000.0	0
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	33 23										
	Other (specify)		1000.00									
s	UBTOTAL of Receipts This Page (optional)		·····				,		7		4500.00)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 11 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund			
Full Name (Last, First, Middle Initial) NORFOLK SOUTHERN CORPORATION Mailing Address ONE CONSTITUTION AVE NE City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State DC Co	Zip Code 20002 00009282	Date of Receipt 06 30 2014 Transaction ID: SA11C.4503 Amount of Each Receipt this Period 2500.00
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) PRIMERICA INC POLITICAL ACTION Mailing Address 1 PRIMERICA PARKWAY City DULUTH FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State GA Coo	Zip Code 30099	Date of Receipt 06 09 2014 Transaction ID: SA11C.4489 Amount of Each Receipt this Period 1000.00
TENN POLITICAL ACTION COMM Mailing Address 228 S WASHINGTON STREET City		,	Date of Receipt 06 30 2014 Transaction ID: SA11C.4499
ALEXANDRIA FEC ID number of contributing federal political committee.		22314	Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			4500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 11 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	ly information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund			
Α.	Full Name (Last, First, Middle Initial) UNAKA COMPANY POLITICAL ACTION	ON COMM	IITTEE INC	Date of Receipt
	Mailing Address 1500 INDUSTRIAL RD			06 09 2014
	City	State	Zip Code	Transaction ID : SA11C.4487
	GREENEVILLE	TN	37743	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0371229	1000.00
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) UNITED PARCEL SERVICE INC. PARCEL SERVICE INC. PARCEL SERVICE INC.			Date of Receipt
	Mailing Address 55 GLENLAKE PARKWAY NE		7:n Code	06 30 2014
	City ATLANTA	State GA	Zip Code 30328	Transaction ID : SA11C.4505 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C cod	0064766	2500.00
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	
<u> </u>	Full Name (Last, First, Middle Initial) VERIZON COMMUNICATIONS INC./VERIZON WIRELESS G	OOD GOVERNI	MENT CLUB (VERIZON/VERIZON WIRELE	S Date of Receipt
•	Mailing Address 1300 I ST NW, STE 400 WEST		= -	06 30 2014
	City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SA11C.4507 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0186288	2500.00
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	
s	UBTOTAL of Receipts This Page (optional)			6000.00

24500.00

TEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page (check only one)	HEDULE B (FEC Form 3X)			FOR LINE I	NUMBER:	PAGE 10 C	OF 11
Detailed Summary Page 27	MIZED DISBURSEMENTS			(check only	one)		
Interpretation copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Healthcare Freedom Fund Full Name (Last, First, Middle Initial) BB&T Mailing Address 1909 K Street, NW City State Zip Code DC 20006 Purpose of Disbursement Bank Service Charge Candidate Name Category/ Type Date of Disbursement this Period Category/ Type 12:00 Date of Disbursement Amount of Each Disbursement this Period Category/ Type 12:00 Transaction ID : SB21B.4511 Date of Disbursement this Period Category/ Type 12:00 Transaction ID : SB21B.4511 Amount of Each Disbursement City State Zip Code Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address 6111 Newman Road City State Zip Code Furfacx VA 22030-5918 Purpose of Disbursement Fundraising Consulting Candidate Name Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Date of Disbursement Category/ Type Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement				I			26
rf or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Healthcare Freedom Fund Full Name (Last, First, Middle Initial) BB&T Mailling Address 1909 K Street, NW City Washington DC 20006 Category/ Type Disbursement Senate President State: District: Full Name (Last, First, Middle Initial) Machado & Co. Mailling Address 6111 Newman Road City State City State Senate President Disbursement For: Senate President City State City Candidate Name Category/ Type Disbursement For: Senate President Other (specify) Transaction ID: SB21B.4510 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Amount of Each Disbursement this Period Category/ Type Disbursement For: Senate President Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For:	information against from such Departs and Obst	manta may not be a	old or				
Healthcare Freedom Fund Full Name (Last, First, Middle Initial) BB&T Mailing Address 1909 K Street, NW City Washington Category/ Bank Service Charge Candidate Name Category/ Type Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Machado & Co. Mailing Address House Senate President VA 22030-5918 Furpose of Disbursement Fundraising Consulting Candidate Name Category/ Type Transaction ID : SB21B.4511 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4511 Amount of Each Disbursement Date of Disbursement Fundraising Consulting Candidate Name Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Date of Disbursement this Period Category/ Type Disbursement Disbursement this Period Category/ Type Disbursement Disbursement this Period Category/ Type Disbursement Disbursement Disbursement this Period Category/ Type Disbursement Disbur							
Full Name (Last, First, Middle Initial) - BB&T Mailing Address 1909 K Street, NW City	NAME OF COMMITTEE (In Full)						
BB&T Mailing Address 1909 K Street, NW City Washington DC 20006 Purpose of Disbursement Bank Service Charge Candidate Name Category/ Type District: Full Name (Last, First, Middle Initial) Date of Disbursement Disbursement For: Category/ Type Category/ Type Transaction ID : SB21B.4511 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Date of Disbursement Full Name (Last, First, Middle Initial) Date of Disbursement Fundraising Consulting Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Topical Separate Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Dother (specify) ▼ Date of Disbursement	Healthcare Freedom Fund						
BB&T Mailing Address 1909 K Street, NW City Washington DC 20006 Purpose of Disbursement Bank Service Charge Candidate Name Category/ Type District: Full Name (Last, First, Middle Initial) Date of Disbursement Disbursement For: Category/ Type Category/ Type Transaction ID : SB21B.4511 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Date of Disbursement Full Name (Last, First, Middle Initial) Date of Disbursement Fundraising Consulting Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type Topical Separate Primary General Other (specify) ▼ Date of Disbursement this Period Category/ Type Dother (specify) ▼ Date of Disbursement	Full Name (Last. First. Middle Initial)						
Mailing Address 1909 K Street, NW City Washington DC 20006 Purpose of Disbursement Bank Service Charge Candidate Name Category/ Type Office Sought: House Senate Primary Other (specify) Full Name (Last, First, Middle Initial) City Fairfax VA 22030-5918 Purpose of Disbursement For: Senate VA 22030-5918 Category/ Type Transaction ID : SB21B.4511 Amount of Each Disbursement this Period Category/ Type Transaction ID : SB21B.4510 Date of Disbursement Transaction ID : SB21B.4510 Amount of Each Disbursement Office Sought: Fundraising Consulting Candidate Name Disbursement For: Senate Primary General Office Sought: Fundraising Consulting Candidate Name Disbursement For: Senate Primary General Other (specify) Transaction ID : SB21B.4510 Amount of Each Disbursement this Period Category/ Type 10552.50 Date of Disbursement Fundraising Consulting Category/ Type Disbursement For: Senate Primary General Other (specify) Total Amount of Each Disbursement this Period Date of Disbursement Date of Disbursement Date of Disbursement					Date of D	isbursement	
City Washington DC 20006 Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: House Primary General Prisident VA 22030-5918 City State Zip Code Primary General Purpose of Disbursement For: Senate Primary General Purpose of Disbursement For: Other (specify) ▼ Date of Disbursement Tisperiod City State Zip Code VA 22030-5918 Purpose of Disbursement For: Other (specify) ▼ Transaction ID: SB21B.4511 Amount of Each Disbursement this Period Date of Disbursement Transaction ID: SB21B.4511 Date of Disbursement Transaction ID: SB21B.4511 Date of Disbursement Transaction ID: SB21B.4510 Date of Disbursement Tisperiod Category/ Type Transaction ID: SB21B.4510 Date of Disbursement Tisperiod Category/ Type Transaction ID: SB21B.4510 Date of Disbursement Tisperiod Category/ Type Transaction ID: SB21B.4510 Date of Disbursement Tisperiod Category/ Type Transaction ID: SB21B.4510 Date of Disbursement Tisperiod Date of Disbursement Date of Disbursement Mailing Address							Υ
Washington Purpose of Disbursement Bank Service Charge Candidate Name Category/ Type Office Sought: House President Primary General Primary General City State Zip Code Fairfax VA Z2030-5918 Purpose of Disbursement Eor: City State Zip Code Fairfax VA Z2030-5918 Purpose of Disbursement For: Fundraising Consulting Candidate Name Category/ Type Transaction ID: SB21B.4511 Amount of Each Disbursement this Period Date of Disbursement Transaction ID: SB21B.4511 Amount of Each Disbursement Transaction ID: SB21B.4510 Date of Disbursement Transaction ID: SB21B.4510 Amount of Each Disbursement Fundraising Consulting Candidate Name Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Category/ Type Transaction ID: SB21B.4510 Date of Disbursement this Period Date of Disbursement Date of Disbursement Date of Disbursement	Mailing Address 1909 K Street, NW				06	23 2014	
Washington Purpose of Disbursement Bank Service Charge Candidate Name Disbursement For: Senate President President Other (specify) Machado & Co. Mailing Address 6111 Newman Road City Fairfax VA Z2030-5918 Purpose of Disbursement Fundraising Consulting Candidate Name Disbursement For: Senate President VA Z2030-5918 Transaction ID: SB21B.4510 Amount of Each Disbursement Date of Disbursement Transaction ID: SB21B.4510 Amount of Each Disbursement Category/ Type Transaction ID: SB21B.4510 Amount of Each Disbursement this Period Category/ Type Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address Date of Disbursement this Period Category/ Type Disbursement For: Senate President Other (specify) ▼ Date of Disbursement this Period Category/ Type Disbursement For: District: Full Name (Last, First, Middle Initial) Date of Disbursement Date of Disbursement Date of Disbursement	ity	State Zip Co	ode		T		
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