

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

Quin Hillyer for Congress

ADDRESS (number and street) ▼

PO Box 82314

Check if different than previously reported. (ACC)

Mobile

AL

36689

2. **FEC IDENTIFICATION NUMBER** ▼

C C00545368

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

AL

01

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 Christopher M Marston

Signature of Treasurer Christopher M Marston

[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
Quin Hillyer 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))....	1235.69	265304.95
(b) Total Contribution Refunds (from Line 20(d))	0.00	16866.66
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1235.69	248438.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10924.94	236247.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	1357.89	1364.89
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	9567.05	234882.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1575.16	
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).....	4200.00	

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

Quin Hillyer 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).....	642.10	196549.31
(ii) Unitemized.....	100.00	30187.66
(iii) TOTAL of contributions from individuals ▶	742.10	226736.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	31737.86
(d) The Candidate.....	493.59	6830.12
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1235.69	265304.95
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	24000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	24000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1357.89	1364.89
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.75
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2593.58	290670.59

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10924.94	236247.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	24000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	24000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	6266.66
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	16866.66
21. OTHER DISBURSEMENTS	6501.00	11981.75
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17425.94	289095.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	16407.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2593.58
25. SUBTOTAL (add Line 23 and Line 24).....	19001.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17425.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1575.16

**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 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	

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)
Quin Hillyer for Congress

A. Full Name (Last, First, Middle Initial)
Miles P Clements

Mailing Address 1100 Poydras St Ste 3700

City State Zip Code
New Orleans LA 70163

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

Name of Employer Info Req Occupation Info Req

Receipt For: 2013
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 01 2013

Transaction ID : SA11AI.6245

Amount of Each Receipt this Period
250.00

Forwarded by Agent

B. Full Name (Last, First, Middle Initial)
T. J. Maloney

Mailing Address 405 Oxford St

City State Zip Code
Heflin AL 36264

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

Name of Employer Self Occupation Consultant

Receipt For: 2013
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date
1393.10

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 22 2013

Transaction ID : SA11AI.6239

Amount of Each Receipt this Period
392.10

In-kind - Office Utilities

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).....

642.10

642.10

**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 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)
Quin Hillyer for Congress

A. Full Name (Last, First, Middle Initial)
Richard Quin Edmonson Hillyer

Mailing Address 3201 Dauphin St
Ste B

City State Zip Code
Mobile AL 36606

FEC ID number of contributing federal political committee. **C H4AL01115**

Name of Employer Self Occupation Writer

Receipt For: 2013
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date
30830.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2013

Transaction ID : SA11D.6232

Amount of Each Receipt this Period
493.59

In-kind - Staff Travel Expense Reimbursement

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).....

493.59

493.59

**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 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)
Quin Hillyer for Congress

A. Full Name (Last, First, Middle Initial)
Twin Oaks Connect

Mailing Address 57 Waddell St SE

City Marietta State GA Zip Code 30060

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

Name of Employer Occupation

Receipt For: 2013
 Primary General
 Other (specify) Special-Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : SA14.6219

Amount of Each Receipt this Period
 1024.48

Credit - Unused VOIP Minutes

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).....

1024.48

1024.48

**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 8 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)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. Alabama Newspaper Advertising Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 3324 Independence Dr		Amount of Each Disbursement this Period 3035.06
City Birmingham State AL Zip Code 35209	Category/Type	
Purpose of Disbursement Advertising	Candidate Name	Transaction ID : SB17.6126
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 200 Vesey St		Amount of Each Disbursement this Period 346.68
City New York State NY Zip Code 10285	Category/Type	
Purpose of Disbursement CC Processing	Candidate Name	Transaction ID : SB17.6196
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address PO Box 105262		Amount of Each Disbursement this Period 139.48
City Atlanta State GA Zip Code 30348	Category/Type	
Purpose of Disbursement Phone Service	Candidate Name	Transaction ID : SB17.6242
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).....	3521.22
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 9 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)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. BrabenderCox, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1218 Grandview Ave		Amount of Each Disbursement this Period 123.54 Transaction ID : SB17.6128
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Online Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1593 Spring Hill Rd Ste 400		Amount of Each Disbursement this Period 920.90 Transaction ID : SB17.6110
City Tyson's Corner	State VA	
Zip Code 22182	Purpose of Disbursement CC Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	

Full Name (Last, First, Middle Initial) c. Fallback Fund		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address c/o Murray Robinson 24 Tacon St		Amount of Each Disbursement this Period 1109.70 Transaction ID : SB17.6189
City Mobile	State AL	
Zip Code 36607	Purpose of Disbursement Utilities and Cleaning Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2154.14
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 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)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. Richard Quin Edmonson Hillyer		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 3201 Dauphin St Ste B		Amount of Each Disbursement this Period 493.59
City State Zip Code Mobile AL 36606	Purpose of Disbursement In-kind - Staff Travel Expense Reimbursement	
Candidate Name	Category/Type	Transaction ID : SB17.6234
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 01	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

Full Name (Last, First, Middle Initial) B. T. J. Maloney		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 405 Oxford St		Amount of Each Disbursement this Period 392.10
City State Zip Code Heflin AL 36264	Purpose of Disbursement In-kind - Office Utilities	
Candidate Name	Category/Type	Transaction ID : SB17.6240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

Full Name (Last, First, Middle Initial) c. Merchant e-Solutions		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 3600 Bridge Pkwy Suite 102		Amount of Each Disbursement this Period 737.96
City State Zip Code Redwood City CA 94065	Purpose of Disbursement CC Processing	
Candidate Name	Category/Type	Transaction ID : SB17.6195
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	

SUBTOTAL of Disbursements This Page (optional).....	1623.65
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)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. North Rock Reports		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 45 N Hill Dr Ste 100		Amount of Each Disbursement this Period 1544.76
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Compliance Consulting; Consultant Expenses	Category/Type	
Candidate Name	Transaction ID : SB17.6124	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) B. Anne F Redd		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1427 Fourth St		Amount of Each Disbursement this Period 1600.00
City New Orleans	State LA	Zip Code 70130
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name	Transaction ID : SB17.6125	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

Full Name (Last, First, Middle Initial) c. J. Murray Robinson		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 24 Tacon St		Amount of Each Disbursement this Period 257.33
City Mobile	State AL	Zip Code 36608
Purpose of Disbursement Reimbursement (See Below)	Category/Type	
Candidate Name	Transaction ID : SB17.6129	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3402.09
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)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 2455 Paces Ferry Rd NW		Amount of Each Disbursement this Period 21.87
City Atlanta	State GA Zip Code 30339	
Purpose of Disbursement Sign Posting Hardware	Candidate Name	Transaction ID : SB17.6129.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 910 Louisiana St		Amount of Each Disbursement this Period 48.49
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : SB17.6129.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address 910 Louisiana St		Amount of Each Disbursement this Period 20.00
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : SB17.6129.3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary	State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	10701.10

**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 type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. Alabama Policy Institute		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 402 Office Park Dr Suite 300		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.6223
City Mountain Brook	State AL Zip Code 35223	
Purpose of Disbursement Contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ken Cuccinelli for Governor		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 10560 Main St Suite 218		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.6243
City Fairfax	State VA Zip Code 22030	
Purpose of Disbursement Contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Leadership Insitute		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 1101 N Highland Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.6220
City Arlington	State VA Zip Code 22201	
Purpose of Disbursement Contribution	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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 14 OF 16			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. LONEGAN FOR SENATE INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 38 EAST RIDGEWOOD AVE STE 181		Amount of Each Disbursement this Period 1000.00
City RIDGEWOOD State NJ Zip Code 07450	Purpose of Disbursement Contribution	Transaction ID : SB21.6186
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. Prichard Preparatory School		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 743 Mount Sinai Ave		Amount of Each Disbursement this Period 1000.00
City Mobile State AL Zip Code 36612	Purpose of Disbursement Contribution	Transaction ID : SB21.6221
Candidate Name	Category/Type	
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. St. Francis at the Point Anglican Church		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 17280 Scenic Hwy 98		Amount of Each Disbursement this Period 1001.00
City Point Clear State AL Zip Code 36564	Purpose of Disbursement Contribution	Transaction ID : SB21.6227
Candidate Name	Category/Type	
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).....	3001.00
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 15 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Quin Hillyer for Congress

Full Name (Last, First, Middle Initial) A. The Pelican Institute for Public Policy		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 643 Magazine St Ste 301		Amount of Each Disbursement this Period 1000.00
City New Orleans	State LA Zip Code 70130	
Purpose of Disbursement Contribution	Candidate Name	Transaction ID : SB21.6225
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Category/ Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Category/ Type	

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

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	6501.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Quin Hillyer for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Quin Edmonson Hillyer		Nature of Debt (Purpose): Reimbursement for Rent paid from Personal Funds
Mailing Address 3201 Dauphin St Ste B		
City State	Zip Code	
Mobile	AL 36606	

Outstanding Balance Beginning This Period	Transaction ID : SD10.6258	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4200.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4200.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="4200.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="4200.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="4200.00"/>