



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Lincoln National Corporation Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		221768.07
(b) Cash on Hand at Beginning of Reporting Period.....	206888.83	
(c) Total Receipts (from Line 19) .....	14549.97	46865.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	221438.80	268633.80
7. Total Disbursements (from Line 31).....	25605.00	72800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	195833.80	195833.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**Lincoln National Corporation Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13045.88	39031.28
(ii) Unitemized .....	1499.00	7818.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14544.88	46849.48
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14544.88	46849.48
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5.09	16.25
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	14549.97	46865.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14549.97	46865.73

**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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	105.00	300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	105.00	300.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	72500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(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
29. Other Disbursements .....	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25605.00	72800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25605.00	72800.00

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	14544.88	46849.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14544.88	46849.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	105.00	300.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	105.00	300.00

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Lincoln National Corporation Political Action Committee**

**A. JOHN ARKO**  
Full Name (Last, First, Middle Initial)

Mailing Address 150 N RADNOR CHESTER RD

City RADNOR	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C**

Name of Employer LINCOLN FINANCIAL GROUP	Occupation ASSISTANT VICE PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14941**

Amount of Each Receipt this Period  

150.00
--------

Bi-weekly payroll deduction 6 @ \$25.00

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

Mailing Address 7258 North Springcrest Place

City Meridian	State ID	Zip Code 83642
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Distributors	Occupation Director, COLI Sales
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14942**

Amount of Each Receipt this Period  

150.00
--------

Bi-weekly payroll deduction 6 @ \$25.00

**C. Michelle Booth**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 South Clinton Street

City Fort Wayne	State IN	Zip Code 46802
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln National Life Ins. Co.	Occupation Director Financial Services Operations
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **718.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14943**

Amount of Each Receipt this Period  

230.76
--------

Bi-weekly payroll deduction 6 @ \$38.46

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>530.76</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. ANDREW BUCKLEE**

Mailing Address 150 N RADNOR CHESTER ROAD

City RADNOR State PA Zip Code 19087

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

Name of Employer LINCOLN FINANCIAL GROUP Occupation HEAD OF MONEY GUARD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3610.00**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11AI.14945**

Amount of Each Receipt this Period  
**1140.00**

Bi-weekly payroll deduction 6 @ \$190.00

Full Name (Last, First, Middle Initial)  
**B. Michael Burns**

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln National Corporation Occupation Senior Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **927.39**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11AI.14946**

Amount of Each Receipt this Period  
**292.86**

Bi-weekly payroll deduction 6 @ \$48.81

Full Name (Last, First, Middle Initial)  
**C. Chuck Cornelio**

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln National Corporation Occupation Executive Vice President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2124.77**

Date of Receipt  
**09 / 19 / 2014**  
**Transaction ID : SA11AI.14952**

Amount of Each Receipt this Period  
**670.98**

Bi-weekly payroll deduction 6 @ \$111.83

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2103.84**

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

**SCHEDULE A (FEC Form 3X)  
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. NICOLE DELIMITROS</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14954</b>
Mailing Address 721 eMERSON RD STE 150		Amount of Each Receipt this Period 210.00
City ST LOUIS	State MO	Zip Code 63141
FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction 6 @ \$35.00	
Name of Employer LINCOLN FINANCIAL GROUP	Occupation RELATIONSHIP MANAGEMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.00	

Full Name (Last, First, Middle Initial) <b>B. PAUL FARRELL</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14958</b>
Mailing Address One Granite Place		Amount of Each Receipt this Period 169.14
City Concord	State NH	Zip Code 03301
FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction 6 @ \$28.19	
Name of Employer Lincoln Financial Group	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.69	

Full Name (Last, First, Middle Initial) <b>C. Randy Freitag</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14961</b>
Mailing Address 100 North Greene Street		Amount of Each Receipt this Period 663.90
City Greensboro	State NC	Zip Code 27401
FEC ID number of contributing federal political committee. C	Bi-weekly payroll deduction 6 @ \$110.65	
Name of Employer Lincoln Financial Group	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2102.35	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1043.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Will Fuller**

Mailing Address 130 N. Radnor Chester Road

City Radnor	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Distributors	Occupation President and CEO
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1966.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14962**

Amount of Each Receipt this Period  
**756.92**

Payroll deduction 4 @ \$93.08; 2 @ \$192.30

Full Name (Last, First, Middle Initial)  
**B. Dennis Glass**

Mailing Address 1500 Market Street Suite 3900

City Philadelphia	State PA	Zip Code 19102
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln National Corporation	Occupation President and COO
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3653.70**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14966**

Amount of Each Receipt this Period  
**1153.80**

Bi-weekly payroll deduction 6 @ \$192.30

Full Name (Last, First, Middle Initial)  
**C. ALLISON GREEN**

Mailing Address 150 North Radnor Chester Road

City Radnor	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Group	Occupation Diversity Officer
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**808.11**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.14967**

Amount of Each Receipt this Period  
**257.94**

Bi-weekly payroll deduction 6 @ \$42.99

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2168.66</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. CELESTE GURULE</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14970</b>
Mailing Address 3000 Executive Parkway Suite 400		Amount of Each Receipt this Period 300.00
City San Ramon	State CA	Zip Code 94583
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction 6 @ \$50.00
Name of Employer Lincoln Financial Group	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name (Last, First, Middle Initial) <b>B. Nathan Hardiman</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14972</b>
Mailing Address 100 North Greene Street		Amount of Each Receipt this Period 237.72
City Greensboro	State NC	Zip Code 27401
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction 6 @ \$39.62
Name of Employer Lincoln Financial Group	Occupation Actuarial Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.82	

Full Name (Last, First, Middle Initial) <b>C. Michael Harris</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14974</b>
Mailing Address 1300 South Clinton Street		Amount of Each Receipt this Period 120.00
City Fort Wayne	State IN	Zip Code 46802
FEC ID number of contributing federal political committee. C		Bi-weekly payroll deduction 6 @ \$20.00
Name of Employer Lincoln National Life Ins. Co.	Occupation Vice President of Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	657.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 29  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. DEBORAH HAYES**

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln Financial Group Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14975**

Amount of Each Receipt this Period  
**300.00**

Bi-weekly payroll deduction 6 @ \$50.00

Full Name (Last, First, Middle Initial)  
**B. Michael Herron**

Mailing Address 1300 South Clinton Street

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Lincoln National Life Ins. Co. Occupation Assistant Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **548.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14977**

Amount of Each Receipt this Period  
**173.10**

Bi-weekly payroll deduction 6 @ \$28.85

Full Name (Last, First, Middle Initial)  
**C. Amy Hester**

Mailing Address 1300 South Clinton Street

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Lincoln National Life Insurance Co. Occupation Assistant Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **757.86**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14978**

Amount of Each Receipt this Period  
**242.28**

Bi-weekly payroll deduction 6 @ \$40.38

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **715.38**

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

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Susan Keating</b>		Date of Receipt MM / DD / YYYY 07 / 11 / 2014 <b>Transaction ID : SA11AI.14980</b>
Mailing Address 350 Church Street		Amount of Each Receipt this Period 33.68 Payroll deduction 1 @ \$33.68
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		
Name of Employer Lincoln National Life Insurance Co	Occupation Assistant Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.64	

Full Name (Last, First, Middle Initial) <b>B. Mark Konen</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14981</b>
Mailing Address 100 North Greene Street		Amount of Each Receipt this Period 743.10 Bi-weekly payroll deduction 6 @ \$123.85
City Greensboro	State NC	Zip Code 27401
FEC ID number of contributing federal political committee. C		
Name of Employer Lincoln National Corporation	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2353.15	

Full Name (Last, First, Middle Initial) <b>C. BRIAN KROLL</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14982</b>
Mailing Address 350 Church Street		Amount of Each Receipt this Period 120.00 Bi-weekly payroll deduction 6 @ \$20.00
City Hartford	State CT	Zip Code 06103
FEC ID number of contributing federal political committee. C		
Name of Employer Lincoln Financial Group	Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	896.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Eric Lanning**

Mailing Address 1300 South Clinton Steet

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Lincoln National Life Ins Co Occupation Senior Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **594.64**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14983**

Amount of Each Receipt this Period  
**189.24**

Bi-weekly payroll deduction 6 @ \$31.54

Full Name (Last, First, Middle Initial)  
**B. ERIC LEVY**

Mailing Address 350 Church Street Metro Center

City Hartford State CT Zip Code 06103

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

Name of Employer Lincoln Financial Group Occupation VP, DC Products

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14984**

Amount of Each Receipt this Period  
**300.00**

Bi-weekly payroll deduction 6 @ \$50.00

Full Name (Last, First, Middle Initial)  
**C. Donald McDade**

Mailing Address 2005 Market Street 34th Floor

City Philadelphia State PA Zip Code 19103

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

Name of Employer Lincoln Financial Advisors Occupation Managing Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : SA11AI.14986**

Amount of Each Receipt this Period  
**150.00**

Bi-weekly payroll deduction 6 @ \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>639.24</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Brad Mendenhall</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14988</b>
Mailing Address 11650 Lantern Road Suite 119		Amount of Each Receipt this Period 180.00 Bi-weekly payroll deduction 6 @ \$30.00
City Fishers State IN Zip Code 46038	FEC ID number of contributing federal political committee. C	
Name of Employer Lincoln Financial Distributors Occupation Sales Vice President	Aggregate Year-to-Date 570.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Richard Millard</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14989</b>
Mailing Address 100 North Greene Street		Amount of Each Receipt this Period 198.84 Bi-weekly payroll deduction 6 @ \$33.14
City Greensboro State NC Zip Code 27401	FEC ID number of contributing federal political committee. C	
Name of Employer Lincoln National Corporation Occupation Assistant Vice President	Aggregate Year-to-Date 623.90	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. William Panyard</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2014 <b>Transaction ID : SA11AI.14991</b>
Mailing Address 1300 South Clinton Street		Amount of Each Receipt this Period 194.22 Bi-weekly payroll deduction 6 @ \$32.37
City Fort Wayne State IN Zip Code 46802	FEC ID number of contributing federal political committee. C	
Name of Employer Lincoln National Life Ins. Co. Occupation Associate Valuation Actuary	Aggregate Year-to-Date 610.77	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	573.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Miko Pickett**

Mailing Address 150 N Radnor Chester Rd

City Radnor	State PA	Zip Code 19087
----------------	-------------	-------------------

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

Name of Employer Lincoln Financial Distributors	Occupation Data Warehouse Manager
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2014

**Transaction ID : SA11AI.14994**

Amount of Each Receipt this Period  

120.00
--------

 Bi-weekly payroll deduction 6 @ \$20.00

Full Name (Last, First, Middle Initial)  
**B. Kent Quam**

Mailing Address 100 North Greene Street

City Greensboro	State NC	Zip Code 27401
--------------------	-------------	-------------------

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

Name of Employer Lincoln National Corporation	Occupation Assistant Vice President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **304.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2014

**Transaction ID : SA11AI.14995**

Amount of Each Receipt this Period  

96.00
-------

 Bi-weekly payroll deduction 6 @ \$16.00

Full Name (Last, First, Middle Initial)  
**C. Stephen Rahn**

Mailing Address 1300 South Clinton Street

City Fort Wayne	State IN	Zip Code 46802
--------------------	-------------	-------------------

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

Name of Employer Lincoln National Life	Occupation Vice President
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **941.28**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2014

**Transaction ID : SA11AI.14996**

Amount of Each Receipt this Period  

300.24
--------

 Bi-weekly payroll deduction 6 @ \$50.04

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>516.24</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

**A. HELENE RAYDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1455 PENNSYLVANIA AVE NW #1110

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Lincoln Financial Group Occupation Director, Federal Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3653.70

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11AI.14997**

Amount of Each Receipt this Period 1153.80

Bi-weekly payroll deduction 6 @ \$192.30

**B. Ronald Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln National Corporation Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11AI.14998**

Amount of Each Receipt this Period 150.00

Bi-weekly payroll deduction 6 @ \$25.00

**C. Christian Rice**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln National Corporation Occupation Assistant Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 614.80

Date of Receipt 09 / 19 / 2014  
**Transaction ID : SA11AI.15000**

Amount of Each Receipt this Period 195.36

Bi-weekly payroll deduction 6 @ \$32.56

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1499.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

**A. Lawrence Samplatsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Church Street

City Hartford State CT Zip Code 06103

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

Name of Employer Lincoln National Life Ins Co Occupation Sr Counsel/Asst Sect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **741.00**

Date of Receipt **09 / 19 / 2014**  
**Transaction ID : SA11Al.15001**

Amount of Each Receipt this Period **236.16**

Bi-weekly payroll deduction 6 @ \$39.36

**B. William Seawell**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 North Greene Street

City Greensboro State NC Zip Code 27401

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

Name of Employer Lincoln National Corporation Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt **07 / 11 / 2014**  
**Transaction ID : SA11Al.15004**

Amount of Each Receipt this Period **55.00**

Payroll deduction 1 @ \$55.00

**C. Bob Sheppard**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 South Clinton Street

City Fort Wayne State IN Zip Code 46802

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

Name of Employer Lincoln National Life Insurance Co. Occupation Second Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt **09 / 19 / 2014**  
**Transaction ID : SA11Al.15005**

Amount of Each Receipt this Period **90.00**

Bi-weekly payroll deduction 6 @ \$15.00

**SUBTOTAL** of Receipts This Page (optional)..... **381.16**

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

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

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"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

**A. WALTER (LEE) SMALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 150 N Radnor Chester Rd

City Radnor	State PA	Zip Code 19087
----------------	-------------	-------------------

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

Name of Employer Lincoln Financial Group	Occupation National Sales Manager
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1900.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11Al.15006**

Amount of Each Receipt this Period  

600.00
--------

 Bi-weekly payroll deduction 6 @ \$100.00

**B. James Spence**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 South Clinton Street

City Fort Wayne	State IN	Zip Code 46802
--------------------	-------------	-------------------

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

Name of Employer Lincoln National Life Ins. Co.	Occupation Regional Vice President
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1006.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11Al.15007**

Amount of Each Receipt this Period  

320.88
--------

 Bi-weekly payroll deduction 6 @ \$53.48

**C. THOMAS TOOLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 Church Street  
Metro Center

City Hartford	State CT	Zip Code 06103
------------------	-------------	-------------------

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

Name of Employer Lincoln Financial Group	Occupation Head of Independent Planning
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **658.54**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11Al.15009**

Amount of Each Receipt this Period  

207.96
--------

 Bi-weekly payroll deduction 6 @ \$34.66

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1128.84</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

**A. Linda Ulrich**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 South Clinton Street

City Fort Wayne	State IN	Zip Code 46802
--------------------	-------------	-------------------

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

Name of Employer Lincoln National Life	Occupation Assistant Vice President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.15010**

Amount of Each Receipt this Period  
72.00

Bi-weekly payroll deduction 6 @ \$12.00

**B. SHARI WHEELER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8801 INDIAN HILLS DRIVE

City OMAHA	State NE	Zip Code 68114
---------------	-------------	-------------------

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

Name of Employer LINCOLN FINANCIAL GROUP	Occupation AVP-LIFE & DENTAL CLAIMS
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

**Transaction ID : SA11AI.15012**

Amount of Each Receipt this Period  
120.00

Bi-weekly payroll deduction 6 @ \$20.00

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	192.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13045.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15017**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15018**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15019**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15020**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15022**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15023**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address Customer Service  
P O Box 609

City Pittsburgh State PA Zip Code 15230-0609

Purpose of Disbursement  
Bank fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15024**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BLUMENTHAL FOR CONNECTICUT**

Mailing Address 777 SUMMER STREET STE 103  
C/O CACACE TUSCH & SANTAGATA

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement  
Political contribution

011

Candidate Name  
**RICHARD BLUMENTHAL**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CT District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB23.14923

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BOB CASEY FOR SENATE INC**

Mailing Address 607 14TH STREET NW SUITE 800

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Political contribution

011

Candidate Name  
**ROBERT P JR CASEY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: PA District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB23.14927

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. BUCSHON FOR CONGRESS**

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement  
Political contribution

011

Candidate Name  
**LARRY D BUCSHON**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: IN District: 08

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB23.14909

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. COLLINS FOR SENATOR**

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement  
Political contribution

011

Candidate Name

**SUSAN M COLLINS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: ME District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2014

**Transaction ID : SB23.14929**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. GEORGIANS FOR ISAKSON**

Mailing Address 6065 ROSWELL ROAD

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
Political contribution

011

Candidate Name

**JOHN HARDY ISAKSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB23.14931**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. HIMES FOR CONGRESS**

Mailing Address 857 POST ROAD, #312

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement  
Political contribution

011

Candidate Name

**JIM HIMES**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CT District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : SB23.14910**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. INSURED RETIREMENT INSTITUTE POLITICAL ACTION COMMITTEE (IRI PAC)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Mailing Address 1101 NEW YORK AVENUE NW  
SUITE 825

**Transaction ID : SB23.14933**

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Political contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. KLINE FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 101 W BURNSVILLE PKWY SUITE 104

**Transaction ID : SB23.14914**

City BURNSVILLE State MN Zip Code 55337

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Political contribution

011
Category/ Type

Candidate Name

**JOHN PAUL JR KLINE**

Office Sought:  House  
 Senate  
 President  
State: MN District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. MIKE CRAPO FOR US SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address PO BOX 1948

**Transaction ID : SB23.14936**

City BOISE State ID Zip Code 83701

Amount of Each Disbursement this Period

-1000.00
----------

Purpose of Disbursement  
Check issues 8-2-13 was never cashed

011
Category/ Type

Candidate Name

**MICHAEL D CRAPO**

Office Sought:  House  
 Senate  
 President  
State: ID District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2500.00
---------

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

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MIKE CRAPO FOR US SENATE**

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement  
Replacement for check issued 8-2-13; not cashed

011

Candidate Name

**MICHAEL D CRAPO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ID District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

**Transaction ID : SB23.14937**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. MIKE KELLY FOR CONGRESS**

Mailing Address PO BOX 476

City LYNDORA State PA Zip Code 16045

Purpose of Disbursement  
Political contribution

011

Candidate Name

**BRIAN KELLY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

**Transaction ID : SB23.14911**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. MOORE FOR CONGRESS**

Mailing Address PO BOX 16646

City MILWAUKEE State WI Zip Code 53216

Purpose of Disbursement  
Political contribution

011

Candidate Name

**GWENDOLYNNE MOORE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	4

**Transaction ID : SB23.14916**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0	0	0	0	0

5	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PAT MEEHAN FOR CONGRESS**

Mailing Address 5035 TOWNSHIP LINE ROAD  
PO BOX 308

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement  
Political contribution

011

Candidate Name

**PATRICK L MEEHAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2014

**Transaction ID : SB23.14915**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. RICHARD BURR COMMITTEE**

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement  
Political contribution

011

Candidate Name

**RICHARD M BURR**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : SB23.14926**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. RICHARD E NEAL FOR CONGRESS COMMITTEE**

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement  
Political contribution

011

Candidate Name

**RICHARD E MR. NEAL**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MA District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2014

**Transaction ID : SB23.14917**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. SANCHEZ FOR CONGRESS**

Mailing Address PO BOX 271166

City State Zip Code  
FLOWER MOUND TX 75027

Purpose of Disbursement  
Political contribution

011

Candidate Name

**LINDA SANCHEZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 38

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	4

**Transaction ID : SB23.14918**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. STUTZMAN FOR CONGRESS**

Mailing Address 0250 W 600 N

City State Zip Code  
Howe IN 46746

Purpose of Disbursement  
Political contribution

011

Candidate Name

**MARLIN A STUTZMAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	4

**Transaction ID : SB23.14921**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. TIBERI FOR CONGRESS**

Mailing Address 2021 E DUBLIN GRANVILLE RD # 2000

City State Zip Code  
COLUMBUS OH 43229

Purpose of Disbursement  
Political contribution

011

Candidate Name

**PATRICK J TIBERI**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

**Transaction ID : SB23.14922**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0	0	0	0	0
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2	0	0	0	0	0	0	0	0	0
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Lincoln National Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. WYDEN FOR SENATE

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement  
Political contribution

011

Category/  
Type

Candidate Name

**RONALD LEE WYDEN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2014

Transaction ID : SB23.14932

Amount of Each Disbursement this Period

1000.00
---------

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1000.00
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25500.00
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