

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

WESTERMAN 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))....	18708.59	301374.92
(b) Total Contribution Refunds (from Line 20(d))	5000.00	5075.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13708.59	296299.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	66620.92	213004.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	66620.92	213004.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	83295.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

WESTERMAN FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 04 / 30 / 2014

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).....	10250.00	246227.77
(ii) Unitemized.....	3919.00	30313.61
(iii) TOTAL of contributions from individuals ▶	14169.00	276541.38
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	14500.00
(d) The Candidate.....	539.59	10333.54
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18708.59	301374.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.20
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	18708.59	301375.12

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	66620.92	213004.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5075.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5000.00	5075.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	71620.92	218079.65

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	136207.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18708.59
25. SUBTOTAL (add Line 23 and Line 24).....	154916.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71620.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	83295.47

**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 23
	<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)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. JACOB E. ABRAHAM

Mailing Address 16 STONEGATE POINT

City State Zip Code
HOT SPRINGS NATIONAL PARK AR 71913

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

Name of Employer Occupation
HOT SPRINGS PAIN MANAGEMENT PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.5531

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
MR. CHAD AMERSON

Mailing Address 1700 MALVERN AVENUE

City State Zip Code
HOT SPRINGS AR 71901

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

Name of Employer Occupation
CAPITAL FINANCIAL ADVISOR, INC. FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.5534

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
A STORAGE PARK

Mailing Address 158 ECHO VALLEY ROAD

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.5651

Amount of Each Receipt this Period
50.00
PARTNERSHIP CONTRIBUTION - SEE ATTRIBUTION

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GAYLON W BOSHEARS

Mailing Address 121 DELLMERE DRIVE

City State Zip Code
HOT SPRINGS NATIONAL PARK AR 71913

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

Name of Employer Occupation
EAST COAST MARKETING GROUP SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.5538

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
REP. KENNETH W. BRAGG

Mailing Address 63 PINECREST CIRCLE

City State Zip Code
SHERIDAN AR 72150

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

Name of Employer Occupation
STATE OF ARKANSAS REPRESENTATIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. TAMMY BROWNING

Mailing Address 118 GLENMORE PLACE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.5522

Amount of Each Receipt this Period
450.00
IN-KIND: MEETING EXPENSE: MEALS

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS. HELEN BRYANT

Mailing Address 703 SURREY ROAD

City State Zip Code
HOT SPRINGS VILLAGE AR 71909

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. TOM BRYANT

Mailing Address 68 HARTURA WAY

City State Zip Code
HOT SPRINGS VILLAGE AR 71909

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
307.39

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL C. CARTER

Mailing Address P.O. BOX 2407

City State Zip Code
FORT SMITH AR 72902

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

Name of Employer Occupation
STEPHENS PRODUCTION COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.5667

Amount of Each Receipt this Period
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ED W. COPELAND

Mailing Address 120 OSPREY DRIVE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.5549

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
REP. BRUCE A. COZART

Mailing Address 420 ROCK CREEK RD.

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
STATE OF ARKANSAS STATE REP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11AI.5550

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER J. DUNKEL

Mailing Address 118 GRAND RIDGE TERRACE

City State Zip Code
HOT SPRINGS AR 71901

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

Name of Employer Occupation
STUBBY'S BBQ PIT MASTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.5656

Amount of Each Receipt this Period
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NANCY M. EMMONS

Mailing Address 33 ALICANTE PLACE

City State Zip Code
HOT SPRINGS VILLAGE AR 71909

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11AI.5556

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. C. E. FORMBY

Mailing Address 804 LONG ISLAND DRIVE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
SELF INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.5562

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. VERNON J. GINGRICH

Mailing Address 158 ECHO VALLEY RD

City State Zip Code
HOT SPRINGS AR 71913-9625

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

Name of Employer Occupation
A STORAGE PARK OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.5652

Amount of Each Receipt this Period
50.00

PARTNERSHIP CONTRIBUTION - A STORAGE PARK
[MEMO ITEM]

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. DANNY RAY HAYNES

Mailing Address 30 STONEGATE SHORES COVE

City State Zip Code
HOT SPRINGS AR 71913-7992

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

Name of Employer Occupation
HAYNES FAMILY DENTAL CLINIC DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.5576

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LYNN M. LEEK

Mailing Address 141 MYRICK LANE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.5527

Amount of Each Receipt this Period
250.00

PARTNERSHIP ATTRIBUTION: LLL LLC

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
LLL LLC

Mailing Address 141 MYRICK LANE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.5529

Amount of Each Receipt this Period
250.00

PARTNERSHIP CONTRIBUTION: SEE ATTRIBUTION

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS. VIRGINIA RUTH MARAK

Mailing Address 118 SUNRISE ST

City State Zip Code
HOT SPRINGS AR 71913-2804

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.5659

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MS. LORNA NOBLES

Mailing Address 171 ARLINGTON PARK TERRACE

City State Zip Code
HOT SPRINGS AR 71901

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

Name of Employer Occupation
TRADEMARK REAL ESTATE, INC. REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.5594

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. CHRIS RAYBON

Mailing Address 220 LOOKOUT CIRCLE

City State Zip Code
HOT SPRINGS AR 71913

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

Name of Employer Occupation
BAXLEY EQUIPMENT COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.5614

Amount of Each Receipt this Period
2600.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. DREW R. TERRY

Mailing Address 315 AUTUMNRIDGE CIR

City State Zip Code
HOT SPRINGS AR 71901-7146

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. GLENDA VAUGHN

Mailing Address 170 CLEAR TRAIL

City State Zip Code
HOT SPRINGS AR 71901

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. RALPH C. WEISER

Mailing Address P.O. BOX 500

City State Zip Code
MAGNOLIA AR 71754

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

Name of Employer Occupation
WEISER BROWN OPERATING OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.5635

Amount of Each Receipt this Period
500.00

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

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

800.00

10250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH ST. NW
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11C.5641

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Mailing Address 801 G STREET NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00452383

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11C.5643

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THE AMERICAN ELECTRIC POWER COMMITTEE FOR RESPONSIBLE GOVERNMENT

Mailing Address 1 RIVERSIDE PLAZA - 26TH FLOOR

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11C.5645

Amount of Each Receipt this Period
1000.00

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

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

4000.00

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<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)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRUCE WESTERMAN

Mailing Address PO BOX 21097

City State Zip Code
HOT SPRINGS AR 71903

FEC ID number of contributing federal political committee. **C H4AR04048**

Name of Employer Occupation
MID-SOUTH ENGINEERING COMPANY ENGINEER/FORESTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8039.98

Date of Receipt
 M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11D.5523

Amount of Each Receipt this Period
328.57

IN-KIND: TRAVEL

B. Full Name (Last, First, Middle Initial)
MR. BRUCE WESTERMAN

Mailing Address PO BOX 21097

City State Zip Code
HOT SPRINGS AR 71903

FEC ID number of contributing federal political committee. **C H4AR04048**

Name of Employer Occupation
MID-SOUTH ENGINEERING COMPANY ENGINEER/FORESTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8042.13

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11D.5525

Amount of Each Receipt this Period
2.15

IN-KIND: TRAVEL

C. Full Name (Last, First, Middle Initial)
MR. BRUCE WESTERMAN

Mailing Address PO BOX 21097

City State Zip Code
HOT SPRINGS AR 71903

FEC ID number of contributing federal political committee. **C H4AR04048**

Name of Employer Occupation
MID-SOUTH ENGINEERING COMPANY ENGINEER/FORESTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8091.60

Date of Receipt
 M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11D.5524

Amount of Each Receipt this Period
49.47

IN-KIND: TRAVEL

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

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

380.19

**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 15 OF 23
	<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)
WESTERMAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRUCE WESTERMAN

Mailing Address PO BOX 21097

City State Zip Code
HOT SPRINGS AR 71903

FEC ID number of contributing federal political committee. **C H4AR04048**

Name of Employer Occupation
MID-SOUTH ENGINEERING COMPANY ENGINEER/FORESTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8251.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 03 / 2014

Transaction ID : SA11D.5646

Amount of Each Receipt this Period
159.40

IN-KIND: SIGNAGE

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).....

159.40

539.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. TAMMY BROWNING			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 118 GLENMORE PLACE			Amount of Each Disbursement this Period 450.00	
City HOT SPRINGS	State AR	Zip Code 71913	Transaction ID : SB17.5515	
Purpose of Disbursement IN-KIND: MEETING EXPENSE: MEALS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DELTA			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 1030 DELTA BOULEVARD			Amount of Each Disbursement this Period 282.00	
City ATLANTA	State GA	Zip Code 30354	Transaction ID : SB17.5519	
Purpose of Disbursement CANDIDATE IN-KIND: TRAVEL: AIR		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. DEMOCRACY ENGINE, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 2125 14TH STREET, NW SUITE 101 WEST			Amount of Each Disbursement this Period 350.20	
City WASHINGTON	State DC	Zip Code 20009	Transaction ID : SB17.5497	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	800.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DEMOCRACY ENGINE, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014	
Mailing Address 2125 14TH STREET, NW SUITE 101 WEST			Amount of Each Disbursement this Period 4.33	
City WASHINGTON	State DC	Zip Code 20009	Transaction ID : SB17.5498	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. DEMOCRACY ENGINE, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 2125 14TH STREET, NW SUITE 101 WEST			Amount of Each Disbursement this Period 2.07	
City WASHINGTON	State DC	Zip Code 20009	Transaction ID : SB17.5499	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. DEMOCRACY ENGINE, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014	
Mailing Address 2125 14TH STREET, NW SUITE 101 WEST			Amount of Each Disbursement this Period 3.95	
City WASHINGTON	State DC	Zip Code 20009	Transaction ID : SB17.5500	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	10.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DIAMOND STATE CONSULTING GROUP		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 315 ROCK ST. #901		Amount of Each Disbursement this Period 26300.40 Transaction ID : SB17.5502
City LITTLE ROCK	State AR	
Zip Code 72202	Purpose of Disbursement DIRECT MAIL PRINTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 22642		Amount of Each Disbursement this Period 2131.21 Transaction ID : SB17.5507
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement FUNDRAISING CONSULTING & EXPENSES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address PO BOX 22642		Amount of Each Disbursement this Period 2953.60 Transaction ID : SB17.5508
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement FUNDRAISING CONSULTING & EXPENSES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	31385.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 23		
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO BOX 22642		Amount of Each Disbursement this Period 3087.84
City LITTLE ROCK	State AR	
Zip Code 72221	Purpose of Disbursement FUNDRAISING CONSULTING & EXPENSES	Transaction ID : SB17.5509
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 6600 NORTH MILITARY TRAIL		Amount of Each Disbursement this Period 18.51
City BOCA RATON	State FL	
Zip Code 33496	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.5510
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 6600 NORTH MILITARY TRAIL		Amount of Each Disbursement this Period 59.36
City BOCA RATON	State FL	
Zip Code 33496	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.5511
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3165.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYNAL CONSULTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 103 MAIN STREET W204		Amount of Each Disbursement this Period 5000.00
City LITTLE ROCK	State AR Zip Code 72201	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type	Transaction ID : SB17.5512
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 138 CONANT STREET FIRST FLOOR		Amount of Each Disbursement this Period 4896.80
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	Transaction ID : SB17.5520
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 138 CONANT STREET FIRST FLOOR		Amount of Each Disbursement this Period 3215.06
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	Transaction ID : SB17.5521
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13111.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THIRD WAVE COMMUNICATIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 448 W NATIONWIDE BLVD SUITE 106		Amount of Each Disbursement this Period 17558.50
City COLUMBUS	State OH Zip Code 42315	
Purpose of Disbursement VIDEO PRODUCTION SERVICES	Category/Type	Transaction ID : SB17.5513
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. MR. BRUCE WESTERMAN		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 328.57
City HOT SPRINGS	State AR Zip Code 71903	
Purpose of Disbursement IN-KIND: TRAVEL	Category/Type	Transaction ID : SB17.5516
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: AR District: 04		

Full Name (Last, First, Middle Initial) C. MR. BRUCE WESTERMAN		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 2.15
City HOT SPRINGS	State AR Zip Code 71903	
Purpose of Disbursement IN-KIND: TRAVEL	Category/Type	Transaction ID : SB17.5518
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: AR District: 04		

SUBTOTAL of Disbursements This Page (optional).....	17889.22
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 22 OF 23	
	<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)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. BRUCE WESTERMAN		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 49.47 Transaction ID : SB17.5517
City HOT SPRINGS	State AR	
Zip Code 71903	Purpose of Disbursement IN-KIND: TRAVEL	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: AR	District: 04	

Full Name (Last, First, Middle Initial) B. MR. BRUCE WESTERMAN		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 159.40 Transaction ID : SB17.5647
City HOT SPRINGS	State AR	
Zip Code 71903	Purpose of Disbursement IN-KIND: SIGNAGE	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: AR	District: 04	

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	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	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	208.87
TOTAL This Period (last page this line number only).....	66571.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 23	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
WESTERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DR. JOHN R PACE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 591 PENNSULA DRIVE		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20A.5503
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Runoff		

Full Name (Last, First, Middle Initial) B. DR. LORRAINE C. TSUI		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 591 PENNSULA DRIVE		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB20A.5504
City HOT SPRINGS	State AR	
Zip Code 71901	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Runoff		

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	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	State: District:
<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00