

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

14 APR 21 AM 10:20

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Committee TO Elect Todd Robinson

ADDRESS (number and street) P.O. Box 12292 Check if different than previously reported. (ACC) Columbus GA 31917

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT C0414637 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2014 through 03/31/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Debra Crawford Signature of Treasurer Debra Crawford Date 04/14/2014

14020315707

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Committee To Elect Todd Robinson

Report Covering the Period: From:

01 ' *01* ' *2014*

To:

03 ' *31* ' *2014*

| | 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)) .. | 5500.00 | |
| (b) Total Contribution Refunds (from Line 20(d)) .. | 0.00 | |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .. | 5500.00 | |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) .. | 0.00 | |
| (b) Total Offsets to Operating Expenditures (from Line 14)... | 0.00 | |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .. | 0.00 | |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)... | 3958.40 | |
| 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

14020313708

DETAILED SUMMARY PAGE

of Receipts

Write or Type Committee Name

Committee To Elect Todd Robinson

Report Covering the Period: From: 01/01/2014 To: 03/31/2014

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)...

5,500.00

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals

(b) Political Party Committees...

(c) Other Political Committees (such as PACs) ..

5,500.00

0

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

5,477.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

10,977.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

(b) All Other Loans...

(c) TOTAL LOANS (add Lines 13(a) and (b))...

0

0

0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..

0

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

10,977.00

14020313709

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES... | 0 | |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .. | 0 | |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate... | 0 | |
| (b) Of All Other Loans | 0 | |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))... | 0 | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees .. | 0 | |
| (b) Political Party Committees... | 0 | |
| (c) Other Political Committees (such as PACs) .. | 0 | |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))... | 0 | |
| 21. OTHER DISBURSEMENTS .. | 8,141.29 | |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 8,141.29 | |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD... | 1,009.9 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)... | 1,097.00 |
| 25. SUBTOTAL (add Line 23 and Line 24) .. | 1,107.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)... | 8,141.29 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)... | 293.71 |

14020313710

**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 | OF | |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 12 | <input type="checkbox"/> 11b <input type="checkbox"/> 13a | <input type="checkbox"/> 11c <input type="checkbox"/> 13b | <input type="checkbox"/> 11d <input type="checkbox"/> 14 |

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)
Committee To Elect Todd Robinson

Full Name (Last, First, Middle Initial)

A. 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

Full Name (Last, First, Middle Initial)

B. 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

Full Name (Last, First, Middle Initial)

C. 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).....

14020313711

**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)

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

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)
Committee To Elect Todd Robinson

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

14020313712

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE OF

FOR LINE NUMBER: (check only one)

13a 13b

NAME OF COMMITTEE (In Full)

Committee To Elect Todd Robinson

LOAN SOURCE Full Name (Last, First, Middle Initial)

NA

Election:

- Primary
General
Other (specify)

Mailing Address

City State ZIP Code

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

Grids for loan amounts and payments

TERMS

Fields for Date Incurred, Date Due, Interest Rate, Secured

List All Endorsers or Guarantors (if any) to Loan Source

Table with 4 rows for endorser/guarantor details including name, address, employer, and amount guaranteed.

SUBTOTALS This Period This Page (optional)...

TOTALS This Period (last page in this line only) ..

Grids for subtotal and total values

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020313713

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

| | |
|--|---------------------------------------|
| NAME OF COMMITTEE (In Full) <i>Committee To Elect Todd Robinson</i> | FEC IDENTIFICATION NUMBER C |
|--|---------------------------------------|

| | | |
|---|-------------------------|--------------------------------|
| LENDING INSTITUTION (LENDER) Full Name <i>NA.</i> | Amount of Loan _____ | Interest Rate (APR) _____ % |
|---|-------------------------|--------------------------------|

| | | | |
|---------------------|---|-------------------------|-------------------------|
| Mailing Address | Date Incurred or Established M M / B B / Y Y Y Y Y Y | M M / B B / Y Y Y Y Y Y | M M / B B / Y Y Y Y Y Y |
| City State Zip Code | Date Due | | |

A. Has loan been restructured? No Yes If yes, date originally incurred M M / B B / Y Y Y Y Y Y

B. If line of credit, Amount of this Draw: _____ Total Outstanding Balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account: _____
 Address: _____
 City, State, Zip: _____

Date account established: M M / D D / Y Y Y Y Y Y

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

| | |
|---|---------------------------------|
| G. COMMITTEE TREASURER Typed Name Signature | DATE M M / B B / Y Y Y Y Y Y |
|---|---------------------------------|

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

| | | |
|--|-------|---------------------------------|
| AUTHORIZED REPRESENTATIVE Typed Name Signature | Title | DATE M M / B B / Y Y Y Y Y Y |
|--|-------|---------------------------------|

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

Committee To Elect Todd Robinson

| | | | |
|--|-------|----------|---------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| <i>NA.</i> | | | |
| Mailing Address | | | |
| City | State | Zip Code | |

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

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

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

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

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

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

14020313715

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

| | |
|---|---|
| Name of Principal Campaign Committee (In Full) <i>Committee To Elect Todd Robinson</i> | Report Covering Period: From: MM / DD / YYYY 01 / 01 / 2014 |
| | To: MM / DD / YYYY 03 / 31 / 2014 |

| Committee Name | (a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees | (b) Line No. 11(b) Total Contributions From Political Party Committees |
|----------------|--|--|
| A | | 0 |
| B | Column Total Last Page Only..... | |

| | (c) Line No. 11(c) Total Contributions From Other Political Committees | (d) Line No. 11(d) Total Contributions From The Candidate | (e) Line No. 11(e) Total Contributions | (f) Line No. 12 Total Transfers From Other Authorized Committees | (g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate | (h) Line No. 13(b) Total All Other Loans |
|---|--|---|---|--|--|---|
| A | 0 | 0 | 0 | 0 | 0 | 0 |
| B | | | | | | |

| | (i) Line No. 13(c) Total Loans | (j) Line No. 14 Total Offsets to Operating Expenditures | (k) Line No. 15 Total Other Receipts | (l) Line No. 16 Total Receipts | (m) Line No. 17 Total Operating Expenditures | (n) Line No. 18 Total Transfers to Other Authorized Committees |
|---|---|---|--|---|--|--|
| A | 0 | 0 | 0 | 10,977. ⁰⁰ | 0 | 0 |
| B | | | | | | |

| | (o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate | (p) Line No. 19(b) Total Loan Repayments of All Other Loans | (q) Line No. 19(c) Total Loan Repayments | (r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons | (s) Line No. 20(b) Total Contribution Refunds to Political Party Committees | (t) Line No. 20(c) Total Contribution Refunds to Other Political Committees |
|---|--|--|---|--|---|---|
| A | 0 | 0 | 0 | 0 | 0 | 0 |
| B | | | | | | |

| | (u) Line No. 20(d) Total Contribution Refunds | (v) Line No. 21 Total Other Disbursements | (w) Line No. 22 Total Disbursements | (x) Line No. 23 Cash on Hand Beginning of Reporting Period | (y) Line No. 27 Cash on Hand Close of Reporting Period | (z) Line No. 9 Debts & Obligations Owed TO the Committee |
|---|---|--|--|--|--|--|
| A | 0 | 8,141.29 | 8,141.29 | 0 | 100.99 | 0 |
| B | | | | | | |

| | (aa) Line No. 10 Debts & Obligations Owed BY the Committee | (bb) Line No. 6(c) Net Contributions | (cc) Line No. 7(c) Net Operating Expenditures |
|---|--|--|--|
| A | 0 | 5500. ⁰⁰ | 0 |
| B | | | |

14020313716

POSTNET barcode

7013 1090 0001 6520 0690

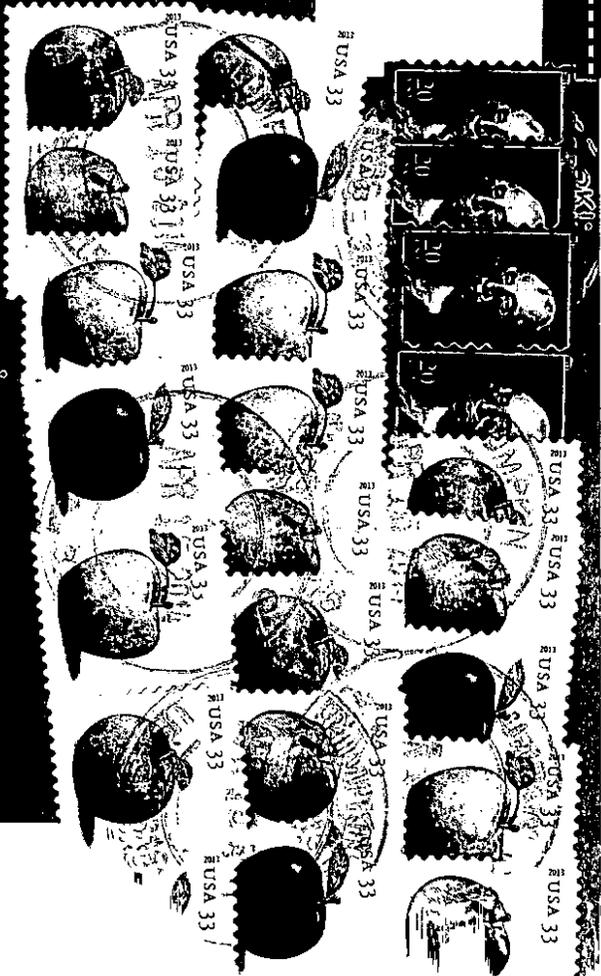


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NANDY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HARVARD OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-71
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

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Date of Receipt

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Postmark

USPS REGISTERED/CERTIFIED _____
Postmark **4/15/14**

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

| | SHIPPING DATE | NEXT BUSINESS DAY DELIVERY |
|------------------|---------------|----------------------------|
| FEDERAL EXPRESS | _____ | <input type="checkbox"/> |
| UPS | _____ | <input type="checkbox"/> |
| DHL | _____ | <input type="checkbox"/> |
| AIRBORNE EXPRESS | _____ | <input type="checkbox"/> |

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

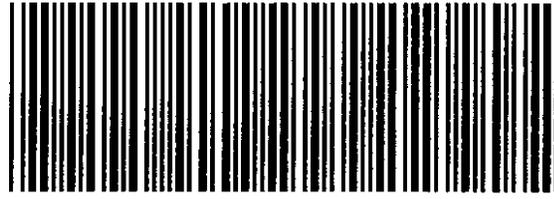
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

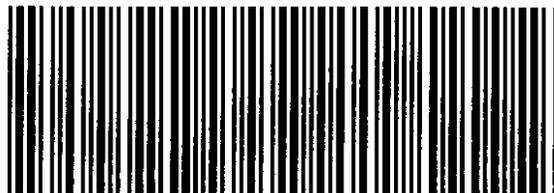
OTHER _____
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **4/21/14**

14020513718



SEN PATCH



SEN PATCH

14020313719