

2014 JUL 15 AM 11:14

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Dana Matheny for Congress

ADDRESS (number and street)

656 Sugarbush South

Check if different than previously reported. (ACC)

Collierville

TN

38017-6188

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

CH4TN08081

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TN

08

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

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

Dana Matheny

Signature of Treasurer

Dana Matheny

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Dana Matheny For Congress

Report Covering the Period:

From:

03/13/2014

To:

07/15/2014

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))

502,981

502,981

(b) Total Contribution Refunds
(from Line 20(d))

000

000

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

502,981

502,981

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

1,885,994

1,885,994

(b) Total Offsets to Operating
Expenditures (from Line 14)

000

000

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

1,885,994

1,885,994

8. Cash on Hand at Close of
Reporting Period (from Line 27)

143,358

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

000

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

152,637

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

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

18,859.94

18,859.94

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.....

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 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS.....

0.00

0.00

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ▶

18,859.94

18,859.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

20,293.52

25. SUBTOTAL (add Line 23 and Line 24).....

20,293.52

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

18,859.94

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

1,433.58

**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 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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) *Dana Matheny for Congress*

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

Mailing Address *5221 Old Shepard Pl*

City *Plano* State *TX* Zip Code *75093*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *Tenet Healthcare* Occupation *Administrator*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *10000*

Date of Receipt *05/21/2014*

Amount of Each Receipt this Period *100.00*

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

~~Mailing Address~~

~~City State Zip Code~~

~~FEC ID number of contributing federal political committee. *C1*~~

~~Name of Employer Occupation~~

~~Receipt For: Primary General Other (specify)~~

~~Election Cycle-to-Date~~

~~Date of Receipt~~

~~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~~

~~Amount of Each Receipt this Period~~

SUBTOTAL of Receipts This Page (optional)..... *100.00*

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

CONFIDENTIAL

**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 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) *Dana Matheny for Congress*

Full Name (Last, First, Middle Initial) <i>Angela Campbell</i>		Date of Receipt M M / D D / Y Y Y Y <i>05 / 28 / 2014</i>
Mailing Address <i>2360 Allyn Way</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Colorado Springs, CO</i>	State Zip Code <i>CO 80915</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>unemployed</i>	Occupation <i>RN</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

Full Name (Last, First, Middle Initial) <i>Dannie Koon</i>		Date of Receipt M M / D D / Y Y Y Y <i>07 / 03 / 2014</i>
Mailing Address <i>135 Shipp Road</i>		Amount of Each Receipt this Period <i>250.00</i>
City <i>Shiloh</i>	State Zip Code <i>GA 31826</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>250.00</i>
Name of Employer <i>Retired</i>	Occupation <i>CP</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>250.00</i>	

Full Name (Last, First, Middle Initial) <i>Marian Castroverde</i>		Date of Receipt M M / D D / Y Y Y Y <i>07 / 07 / 2014</i>
Mailing Address <i>505 S Forest Hill Irene Rd.</i>		Amount of Each Receipt this Period <i>500.00</i>
City <i>Cordova</i>	State Zip Code <i>TN 38018</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>500.00</i>
Name of Employer <i>self employed</i>	Occupation <i>Running Coach</i>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <i>500.00</i>	

SUBTOTAL of Receipts This Page (optional).....	<i>1,000.00</i>
TOTAL This Period (last page this line number only).....	

**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 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) *Dana Matheny for Congress*

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

Mailing Address *1025 Crosswinds Cove*

City *Collierville* State *TN* Zip Code *38017*

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

Name of Employer *Federal Electro Optics* Occupation *Best Effort*

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date *2000*

Date of Receipt *07 / 11 / 2014*

Amount of Each Receipt this Period *200.00*

~~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~~

~~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~~

~~Amount of Each Receipt this Period~~

SUBTOTAL of Receipts This Page (optional) *200.00*

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full) *Dana Matheny for Congress*

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

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

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

Name of Employer *Methodist LeBaker* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *690*

Date of Receipt *03 / 13 / 2014*

Amount of Each Receipt this Period *690*

paid in kind - paid for copying

B. Full Name (Last, First, Middle Initial) *Dana Matheny*

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

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

Name of Employer *Methodist LeBaker* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *866*

Date of Receipt *03 / 13 / 2014*

Amount of Each Receipt this Period *176*

paid in kind office supplies

C. Full Name (Last, First, Middle Initial) *Dana Matheny*

Mailing Address *656 Sugarbush South*

City *Collierville* State *TN* Zip Code *38017*

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

Name of Employer *Methodist LeBaker* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *3160*

Date of Receipt *03 / 13 / 2014*

Amount of Each Receipt this Period *2294*

paid in kind - postage

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

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

3160

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

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

FOR LINE NUMBER:		PAGE		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full) *Dana Mathay for Congress*

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

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *Methodist LeBonker* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *4035*

Date of Receipt *03 25 2014*

Amount of Each Receipt this Period *875*

in kind paid postage

B. Full Name (Last, First, Middle Initial) *Dana Mathay for Congress*

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *Methodist Healthcare* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *5935*

Date of Receipt *03 21 2014*

Amount of Each Receipt this Period *1900*

in kind - paid web hosting

C. Full Name (Last, First, Middle Initial) *Dana Mathay for Congress*

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *Methodist Healthcare* Occupation *Director*

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *6335*

Date of Receipt *04 20 2014*

Amount of Each Receipt this Period *400*

paid in kind photos

SUBTOTAL of Receipts This Page (optional)..... *3175*

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

11-01-14-001

**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 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) *Dana Matheny for Congress*

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

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *unemployed* Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *168426*

Date of Receipt *06/25/2014*

Amount of Each Receipt this Period *21140*
paid in-kind signs

B. Full Name (Last, First, Middle Initial) *Dana Matheny*

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

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

Name of Employer *unemployed* Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *349681*

Date of Receipt *06/13/2014*

Amount of Each Receipt this Period *181255*
paid in-kind-Directmail

C. Full Name (Last, First, Middle Initial) *Dana Matheny*

Mailing Address *656 Sugarbush S.*

City *Collierville* State *TN* Zip Code *38017*

FEC ID number of contributing federal political committee. *C1*

Name of Employer *unemployed* Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date *372981*

Date of Receipt *06/16/2014*

Amount of Each Receipt this Period *23300*

SUBTOTAL of Receipts This Page (optional)..... *225695*

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

FROM INFORMATION

**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 OF

<input 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)

Dana Matheny for Congress

Full Name (Last, First, Middle Initial)

A. *Office Depot*

Mailing Address *305 Market Blvd*

City *Collierville* State *TN* Zip Code *38017*

Purpose of Disbursement
Copying / copies

Candidate Name
Dana Matheny for Congress

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

03 13 2014

Amount of Each Disbursement this Period

690

B. *Office Depot*

Mailing Address *305 Market Blvd*

City *Collierville* State *TN* Zip Code *38017*

Purpose of Disbursement
Office Supplies

Candidate Name
Dana Matheny for Congress

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

03 13 2014

Amount of Each Disbursement this Period

176

C. *Federal Express*

Mailing Address *1016 West Poplar Ave.*

City *Collierville* State *TN* Zip Code *38017*

Purpose of Disbursement
Postage

Candidate Name
Dana Matheny for Congress

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

03 13 2014

Amount of Each Disbursement this Period

2294

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

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

3160

**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 OF

<input 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)

Dana Matheny for Congress

Full Name (Last, First, Middle Initial)

A.

Collierville Post Office

Date of Disbursement

03 25 2014

Mailing Address

131 South Center Street

City

Collierville

State

TN

Zip Code

38017

Amount of Each Disbursement this Period

8.75

Purpose of Disbursement

Postage

Candidate Name

Dana Matheny for Congress

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: *TN*

District: *08*

Full Name (Last, First, Middle Initial)

B.

Collierville Post Office

Date of Disbursement

04 28 2014

Mailing Address

131 South Center Street

City

Collierville

State

TN

Zip Code

38017

Amount of Each Disbursement this Period

44.10

Purpose of Disbursement

Postage

Candidate Name

Dana Matheny for Congress

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: *TN*

District: *08*

Full Name (Last, First, Middle Initial)

C.

Dollar Photo Club

Date of Disbursement

04 20 2014

Mailing Address

2711 Centerville Road Suite 400

City

Wilmington, Delaware

State

Zip Code

19808

Amount of Each Disbursement this Period

9.00

Purpose of Disbursement

Photography

Candidate Name

Dana Matheny for Congress

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: *TN*

District: *08*

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

56.85

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

CONFIDENTIAL

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

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NAME OF COMMITTEE (In Full)
Dana Matheny for Congress

13001100-1-10

A. Full Name (Last, First, Middle Initial) <i>Nation Builder</i>		Date of Disbursement M M / D D / Y Y Y Y <i>03 / 21 / 2014</i>
Mailing Address <i>448 S. Hill St. Suite 200</i>		Amount of Each Disbursement this Period <i>19.00</i>
City <i>Los Angeles</i>	State <i>CA</i>	
Zip Code <i>90013</i>		Category/ Type
Purpose of Disbursement <i>Web Hosting</i>		
Candidate Name <i>Dana Matheny for Congress</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <i>TN</i>	District: <i>08</i>	

B. Full Name (Last, First, Middle Initial) <i>Nation Builder</i>		Date of Disbursement M M / D D / Y Y Y Y <i>04 / 21 / 2014</i>
Mailing Address <i>448 S. Hill St. Suite 200</i>		Amount of Each Disbursement this Period <i>59.99</i>
City <i>Los Angeles</i>	State <i>CA</i>	
Zip Code <i>90013</i>		Category/ Type
Purpose of Disbursement <i>Web Hosting</i>		
Candidate Name <i>Dana Matheny</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <i>TN</i>	District: <i>08</i>	

C. Full Name (Last, First, Middle Initial) <i>Nation Builder</i>		Date of Disbursement M M / D D / Y Y Y Y <i>05 / 21 / 2014</i>
Mailing Address <i>448 S. Hill St. Suite 200</i>		Amount of Each Disbursement this Period <i>59.99</i>
City <i>Los Angeles</i>	State <i>CA</i>	
Zip Code <i>90013</i>		Category/ Type
Purpose of Disbursement <i>Web Hosting</i>		
Candidate Name <i>Dana Matheny for Congress</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <i>TN</i>	District: <i>08</i>	

SUBTOTAL of Disbursements This Page (optional).....	<i>138.98</i>
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Dana Matheny for Congress

Full Name (Last, First, Middle Initial)

A. *Nation Builders*

Mailing Address *448 S. Hill Suite 200*

City *Los Angeles* State *CA* Zip Code *90013*

Purpose of Disbursement *Web Hosting*

Candidate Name *Dana Matheny for Congress*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

06 21 2014

Amount of Each Disbursement this Period

230.19

B. *99 Designs*

Mailing Address *447 Battery Street 3rd Floor*

City *San Francisco, CA* State *CA* Zip Code *94111*

Purpose of Disbursement *Logo Design*

Candidate Name *Dana Matheny for Congress*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

05 19 2014

Amount of Each Disbursement this Period

298.00

C. *Regions Bank*

Mailing Address *1300 West Poplar Ave.*

City *Collierville TN* State *TN* Zip Code *38017*

Purpose of Disbursement *Bank Fee*

Candidate Name *Dana Matheny for Congress*

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TN* District: *08*

Date of Disbursement

04 30 2014

Amount of Each Disbursement this Period

10.00

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

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

538.19

14-00000-1-14

**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 OF

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Dana Matheny for Congress

Full Name (Last, First, Middle Initial)

A. *Regions Bank*
 Mailing Address: *1300 West Poplar Ave*
 City: *Collierville TN 38017*
 Purpose of Disbursement: *Bank Fee*
 Candidate Name: *Dana Matheny*
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: *TN* District: *08*
 Date of Disbursement: *05 31 2014*
 Amount of Each Disbursement this Period: *10.00*

B. *Regions Bank*
 Mailing Address: *1300 West Poplar Ave.*
 City: *Collierville TN 38017*
 Purpose of Disbursement: *Bank Fee*
 Candidate Name: *Dana Matheny for Congress*
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: *TN* District: *08*
 Date of Disbursement: *06 30 2014*
 Amount of Each Disbursement this Period: *10.00*

C. *Democracy Engine LLC*
 Mailing Address: *850 Gainer St. NW #402*
 City: *Washington DC 20011*
 Purpose of Disbursement: *Processing Fee*
 Candidate Name: *Dana Matheny*
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: *TN* District: *08*
 Date of Disbursement: *05 21 2014*
 Amount of Each Disbursement this Period: *395*

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

2395

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	OF
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c

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NAME OF COMMITTEE (In Full)
Dana Mathan For Congress

Full Name (Last, First, Middle Initial) <i>Democracy Engine LLC</i>		Date of Disbursement M M / D D / Y Y Y Y <i>05 / 28 / 2014</i>
Mailing Address <i>850 Quincy Street NW #402</i>		Amount of Each Disbursement this Period <i>395</i>
City <i>Washington DC</i>	State Zip Code <i>20011</i>	
Purpose of Disbursement <i>Processing Fee</i>		Category/ Type
Candidate Name <i>Dana Mathan</i>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>TN</i> District: <i>08</i>		

Full Name (Last, First, Middle Initial) <i>Democracy Engine LLC</i>		Date of Disbursement M M / D D / Y Y Y Y <i>06 / 04 / 2014</i>
Mailing Address <i>850 Quincy St. NW #402</i>		Amount of Each Disbursement this Period <i>957</i>
City <i>Washington DC</i>	State Zip Code <i>20011</i>	
Purpose of Disbursement <i>Processing Fee</i>		Category/ Type
Candidate Name <i>Dana Mathan For Congress</i>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>TN</i> District: <i>08</i>		

Full Name (Last, First, Middle Initial) <i>Democracy Engine LLC</i>		Date of Disbursement M M / D D / Y Y Y Y <i>07 / 03 / 2014</i>
Mailing Address <i>850 Quincy St. NW #402</i>		Amount of Each Disbursement this Period <i>1895</i>
City <i>Washington DC</i>	State Zip Code <i>20011</i>	
Purpose of Disbursement <i>Processing Fee</i>		Category/ Type
Candidate Name <i>Dana Mathan For Congress</i>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>TN</i> District: <i>08</i>		

SUBTOTAL of Disbursements This Page (optional).....	<i>3247</i>
TOTAL This Period (last page this line number only).....	

13-00000-1-13M

**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 OF

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (in Full)

Dana Matheny for Congress

Full Name (Last, First, Middle Initial)

A. *Signs on the Cheap*

Date of Disbursement

Mailing Address *11525 A Stonehollow Dr. Ste 100*

M M / D D / Y Y Y Y
06 / 12 / 2014

City *Austin* State *TX* Zip Code *78758*

Amount of Each Disbursement this Period

Purpose of Disbursement *Signs*

1,234.5

Candidate Name *Dana Matheny for Congress*

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TX* District: *08*

Full Name (Last, First, Middle Initial)

B. *Signs on the Cheap*

Date of Disbursement

Mailing Address *11525 Stonehollow Dr. Suite 100*

M M / D D / Y Y Y Y
06 / 12 / 2014

City *Austin* State *TX* Zip Code *78758*

Amount of Each Disbursement this Period

Purpose of Disbursement *Signs*

9.90

Candidate Name *Dana Matheny for Congress*

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TX* District: *08*

Full Name (Last, First, Middle Initial)

C. *Signs on the Cheap*

Date of Disbursement

Mailing Address *11525 Stonehollow Dr. Suite 100*

M M / D D / Y Y Y Y
06 / 12 / 2014

City *Austin* State *TX* Zip Code *78758*

Amount of Each Disbursement this Period

Purpose of Disbursement *Signs*

3,839.9

Candidate Name *Dana Matheny for Congress*

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *TX* District: *08*

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

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

517.24

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

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NAME OF COMMITTEE (in Full)
Dana Matheny for Congress

Full Name (Last, First, Middle Initial) A. <i>Sigmas on the Cheap</i>		Date of Disbursement <i>06 25 2014</i>
Mailing Address <i>11525A Stonchollow Dr. Suite 100</i>		Amount of Each Disbursement this Period <i>21140</i>
City <i>Austin</i>	State <i>TX</i>	
Zip Code <i>78758</i>		Category/ Type
Purpose of Disbursement <i>Sigmas</i>		
Candidate Name <i>Dana Matheny for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

Full Name (Last, First, Middle Initial) B. <i>Print, Label, and Mail - Dynamic Direct.com</i>		Date of Disbursement <i>06 16 2014</i>
Mailing Address <i>6004 Wiley Street</i>		Amount of Each Disbursement this Period <i>23300</i>
City <i>Hollywood</i>	State <i>Florida</i>	
Zip Code <i>33023</i>		Category/ Type
Purpose of Disbursement <i>Palm Cards</i>		
Candidate Name <i>Dana Matheny for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

Full Name (Last, First, Middle Initial) C. <i>Print, Label + Mail - Dynamic Direct.com</i>		Date of Disbursement <i>06 23 2014</i>
Mailing Address <i>6004 Wiley Street</i>		Amount of Each Disbursement this Period <i>181255</i>
City <i>Hollywood</i>	State <i>Florida</i>	
Zip Code <i>33023</i>		Category/ Type
Purpose of Disbursement <i>Direct Mail Services</i>		
Candidate Name <i>Dana Matheny for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

SUBTOTAL of Disbursements This Page (optional).....	<i>225695</i>
TOTAL This Period (last page this line number only).....	

12011010-1-11-11

**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	OF
<input 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)
Dana Mathay for Congress

Full Name (Last, First, Middle Initial) A. <i>Print Label, & Mail - Dynamic Direct.com</i>		Date of Disbursement <i>07 22 2014</i>
Mailing Address <i>6004 Wiley Street</i>		Amount of Each Disbursement this Period <i>1306371</i>
City <i>Hollywood</i>	State <i>Florida</i>	
Zip Code <i>33023</i>		Category/ Type
Purpose of Disbursement <i>Direct Mail Services</i>		
Candidate Name <i>Dana Mathay for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

Full Name (Last, First, Middle Initial) B. <i>Clear Channel</i>		Date of Disbursement <i>07 10 2014</i>
Mailing Address <i>2650 Thousand Oaks Blvd, Suite 4100</i>		Amount of Each Disbursement this Period <i>170000</i>
City <i>Memphis</i>	State <i>TN</i>	
Zip Code <i>38118</i>		Category/ Type
Purpose of Disbursement <i>Advertising - Radio</i>		
Candidate Name <i>Dana Mathay for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

Full Name (Last, First, Middle Initial) C. <i>Carter Creative Services - Bob Carter</i>		Date of Disbursement <i>07 10 2014</i>
Mailing Address <i>776 Amberglen Amberglen Lane</i>		Amount of Each Disbursement this Period <i>50000</i>
City <i>Lawrenceville</i>	State <i>GA</i>	
Zip Code <i>30043</i>		Category/ Type
Purpose of Disbursement <i>Advertising - Development</i>		
Candidate Name <i>Dana Mathay for Congress</i>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <i>TN</i> District: <i>08</i>	

SUBTOTAL of Disbursements This Page (optional).....	<i>1526371</i>
TOTAL This Period (last page this line number only).....	

FROM 11-10-14-10

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>Dana Mathas For Congress</i>	Report Covering Period: From: MM / DD / YYYY <i>03 / 13 / 2014</i> To: MM / DD / YYYY <i>07 / 15 / 2014</i>
---	--

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	<i>1300.00</i>	<i>0.00</i>

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	<i>0.00</i>	<i>3729.81</i>	<i>5029.81</i>	<i>0.00</i>	<i>15,263.71</i>
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	<i>15263.71</i>	<i>0.00</i>	<i>0.00</i>	<i>20,293.52</i>	<i>18859.94</i>
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	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
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	<i>0.00</i>	<i>0.00</i>	<i>18,859.94</i>	<i>0.00</i>	<i>1433.58</i>
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	<i>15,263.71</i>	<i>5029.81</i>	<i>18,859.94</i>		
B					

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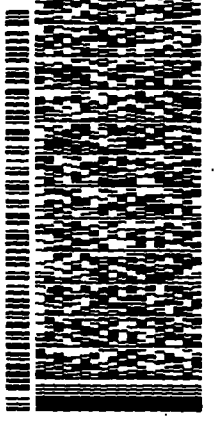
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Part # 156297-435 RIT2 05/14
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CRD: OFFC1501
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BILL SENDER
ORIGIN ID: HKAA
UNITED STATES US
TO

FEDERAL ELECTIONS COMMISSION
999 E STREET NW

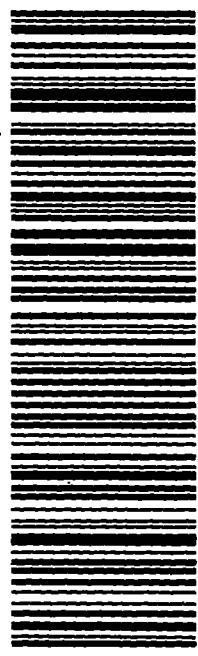
WASHINGTON DC 20463
REF: (800) 210-7006
DEPT:



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Federal Election Commission
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FEDEX	Shipping Date 7/14/14
Next Business Day Delivery	<input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARED
 PREPARER
 (8/2013)

7/15/14
 DATE PREPARED

14-00000-1000