

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Walters 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))....	4244.00	127614.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4244.00	127364.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	60268.47	124689.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60268.47	124689.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2674.14	
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

Walters for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4069.00	108369.00
(ii) Unitemized.....	175.00	8555.00
(iii) TOTAL of contributions from individuals ▶	4244.00	116924.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10690.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4244.00	127614.00
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	0.00
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)..... ▶	4244.00	127614.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60268.47	124689.86
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	250.00
(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	250.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	60268.47	124939.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	58698.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4244.00
25. SUBTOTAL (add Line 23 and Line 24).....	62942.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60268.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2674.14

**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 13
	<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)
Walters for Congress

A. Full Name (Last, First, Middle Initial)
Billy Edwards

Mailing Address 144 Billy Joyce Ln.

City State Zip Code
Kearneysville WV 25430

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
3854.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2014

Transaction ID : SA11AI.4654

Amount of Each Receipt this Period
3819.00
Contribution

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

Mailing Address 7 Chase Rd.

City State Zip Code
Orchard Park NY 14127

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

Name of Employer Occupation
Designed Settlement Services, Inc. Settlement Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2014

Transaction ID : SA11AI.4652

Amount of Each Receipt this Period
250.00
Contribution

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).....

4069.00

4069.00

**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 6 OF 13			
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Brickstreet Insurance		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 400 Quarrier Street		Amount of Each Disbursement this Period 686.00
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Insurance	Transaction ID : SB17.4678
Candidate Name	001 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. Capitol Partners LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 1808 I Street NW #200		Amount of Each Disbursement this Period 800.00
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Consulting	Transaction ID : SB17.4661
Candidate Name	001 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. Infogroup		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 1020 E 1st Street		Amount of Each Disbursement this Period 800.00
City Papillion	State NE	
Zip Code 68046	Purpose of Disbursement Email Append	Transaction ID : SB17.4694
Candidate Name	001 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).....	2286.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13			
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Jordan Properties			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 1030 Bridge Road			Amount of Each Disbursement this Period 500.00	
City Charleston	State WV	Zip Code 25314	Transaction ID : SB17.4681	
Purpose of Disbursement Rent		Category/ Type 001		
Candidate Name				
Office Sought:	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. Michael Lukach			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014	
Mailing Address 184 Summers Street			Amount of Each Disbursement this Period 497.24	
City Charleston	State WV	Zip Code 25301	Transaction ID : SB17.4689	
Purpose of Disbursement Expenses		Category/ Type 001		
Candidate Name				
Office Sought:	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. Michael Lukach			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014	
Mailing Address 184 Summers Street			Amount of Each Disbursement this Period 4192.48	
City Charleston	State WV	Zip Code 25301	Transaction ID : SB17.4688	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought:	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).....	5189.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 13			
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Michael Lukach		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 184 Summers Street		Amount of Each Disbursement this Period 7807.52 Transaction ID : SB17.4672
City Charleston	State WV Zip Code 25301	
Purpose of Disbursement Salary	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. Mercury LLC		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 250 Greenwich Street, 36th floor		Amount of Each Disbursement this Period 25658.34 Transaction ID : SB17.4667
City New York	State NY Zip Code 10007	
Purpose of Disbursement Consulting	Category/Type 001	
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. Motorists Mutual Insurance		Date of Disbursement MM / DD / YYYY 01 / 09 / 2014
Mailing Address 471 E Broad St		Amount of Each Disbursement this Period 126.43 Transaction ID : SB17.4683
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Insurance	Category/Type 001	
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).....	33592.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 13	
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Neyer Management			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 3927 Brotherton Rd			Amount of Each Disbursement this Period 800.00	
City Cincinnati	State OH	Zip Code 45209	Transaction ID : SB17.4673	
Purpose of Disbursement rent		Category/Type 001		
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. Rivet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014	
Mailing Address 204 37th Ave N 439			Amount of Each Disbursement this Period 4427.00	
City St Petersburg	State FL	Zip Code 33704	Transaction ID : SB17.4696	
Purpose of Disbursement Fundraising		Category/Type 001		
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. Rivet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014	
Mailing Address 204 37th Ave N 439			Amount of Each Disbursement this Period 388.90	
City St Petersburg	State FL	Zip Code 33704	Transaction ID : SB17.4692	
Purpose of Disbursement Expenses		Category/Type 002		
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).....	5615.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 13			
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Rivet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014	
Mailing Address 204 37th Ave N 439			Amount of Each Disbursement this Period 4000.00	
City St Petersburg	State FL	Zip Code 33704	Transaction ID : SB17.4669	
Purpose of Disbursement Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2914 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Rivet Strategies LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 204 37th Ave N 439			Amount of Each Disbursement this Period 4000.00	
City St Petersburg	State FL	Zip Code 33704	Transaction ID : SB17.4664	
Purpose of Disbursement Fundraising		Category/ Type 003		
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. Suddenlink			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 3000 Charleston Town Center			Amount of Each Disbursement this Period 117.01	
City Charleston	State WV	Zip Code 25339	Transaction ID : SB17.4677	
Purpose of Disbursement Utilities		Category/ Type 001		
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).....	8117.01
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 13	
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial) A. Unemployment Compensation Division		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 112 California Avenue		Amount of Each Disbursement this Period 323.00 Transaction ID : SB17.4684
City Charleston	State WV Zip Code 25305	
Purpose of Disbursement Unemployment Taxes	Category/Type 001	
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. Unemployment Compensation Division		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 112 California Avenue		Amount of Each Disbursement this Period 324.00 Transaction ID : SB17.4670
City Charleston	State WV Zip Code 25305	
Purpose of Disbursement Unemployment Tax	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. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4680
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Software	Category/Type 001	
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).....	767.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 13			
	<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)
Walters for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Vertical Response		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		18		2014
M M	/	D D	/	Y Y Y Y									
02		18		2014									
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94105</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94105	<table border="1"> <tr> <td>120.00</td> </tr> </table>		120.00			
City	State	Zip Code											
San Francisco	CA	94105											
120.00													
Purpose of Disbursement Software		Transaction ID : SB17.4666											
Candidate Name		Category/Type 001											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Vertical Response		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		17		2014
M M	/	D D	/	Y Y Y Y									
03		17		2014									
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94105</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94105	<table border="1"> <tr> <td>120.00</td> </tr> </table>		120.00			
City	State	Zip Code											
San Francisco	CA	94105											
120.00													
Purpose of Disbursement Software		Transaction ID : SB17.4660											
Candidate Name		Category/Type 001											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. West Virginia State Tax Dept		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		07		2014
M M	/	D D	/	Y Y Y Y									
01		07		2014									
Mailing Address PO Box 3784		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Charleston</td> <td>WV</td> <td>25337</td> </tr> </table>		City	State	Zip Code	Charleston	WV	25337	<table border="1"> <tr> <td>323.00</td> </tr> </table>		323.00			
City	State	Zip Code											
Charleston	WV	25337											
323.00													
Purpose of Disbursement State Tax		Transaction ID : SB17.4686											
Candidate Name		Category/Type 001											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	563.00
TOTAL This Period (last page this line number only).....	60157.47