

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED 2012 MAY -1 AM 9:08 FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 COMMITTEE TO ELECT BILL LESTER, CONGRESSMAN

ADDRESS (number and street) 1203 PRINCE STREET BECKLEY WV 25801-1

2. FEC IDENTIFICATION NUMBER C Top Assigned 3. IS THIS REPORT NEW (N) OR AMENDED (A) WV 03

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 05'08'2012 in the State of WV (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 11'30'2011 through 04'18'2012

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 Paula Frydrych Signature of Treasurer Paula Frydrych Date 04'23'2012

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

12030800806

Write or Type Committee Name

Committee To Elect Bill Lester Congressman

Report Covering the Period: From:

11 ' 30 ' 2011

To:

04 ' 18 ' 2012

12030800807

	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))....	, , .	, 11,825.14
(b) Total Contribution Refunds (from Line 20(d))	, , .	, , 0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, , .	, 11,825.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	, , .	, 11,325.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	, , .	, , .
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, , .	, 11,325.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	, 500.00	
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)

Page 3

Write or Type Committee Name

Committee to Elect Bill Lester Congressman

Report Covering the Period: From:

11 ' 30 ' 2011

To:

04 ' 18 ' 2012

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).....

, , , , 500.00

(ii) Unitemized.....

, , , , .

(iii) TOTAL of contributions from individuals ▶

, , , , 500.00

(b) Political Party Committees.....

, , , , .

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

, , , , .

(d) The Candidate.....

, , , , 11,325.14

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

, , , , 11,825.14

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

, , , , .

13. LOANS:

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

, , , , .

(b) All Other Loans.....

, , , , .

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

, , , , .

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

, , , , .

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

, , , , .

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

, , , , 11,825.14

12030800808

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

12030800809

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	, , .	, 11,325.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	, , .	, , .
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	, , .	, , .
(b) Of All Other Loans	, , .	, , .
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	, , .	, , .
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	, , .	, , .
(b) Political Party Committees.....	, , .	, , .
(c) Other Political Committees (such as PACs).....	, , .	, , .
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	, , .	, , .
21. OTHER DISBURSEMENTS	, , .	, , .
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	, , .	, 11,325.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	, , .	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	, , .	11,825.14
25. SUBTOTAL (add Line 23 and Line 24).....	, , .	11,825.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	, , .	11,325.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	, , .	500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE	OF	
	(check only one)	<input checked="" 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)
Committee to Elect Bill Lester Congressman

Full Name (Last, First, Middle Initial) A. Lester, Sr. William M. and Betty		Date of Receipt 04 ' 10 ' 2012
Mailing Address Box 2 Green Street		Amount of Each Receipt this Period , 500.00
City Mullens	State WV Zip Code 25882	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , 500.00
Name of Employer UIA	Occupation Retired	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , 500.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , .	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , .	

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

12030800810

**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 checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Committee to Elect Bill Lester Congressman

Full Name (Last, First, Middle Initial) Bill Lester		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 203 Prince Street		Amount of Each Receipt this Period , 11,325.14 (candidate's own money spent)
City beckley	State WV Zip Code 25801	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , 11,325.14 (candidate's own money spent)
Name of Employer Self-employed	Occupation Lawyer	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , 11,325.14	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , .	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , .	

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

12030800811

**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 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)
Committee to Elect Bill Luter Congressman

A. <u>Jason Crimmel</u> Full Name (Last, First, Middle Initial)		Date of Disbursement <u>11 ' 30 ' 2011</u>
Mailing Address <u>2202 Mount Vernon Rd.</u>		Amount of Each Disbursement this Period <u>750.00</u>
City <u>Hurricane</u>	State <u>WV</u>	
Zip Code <u>25526</u>		004 Category/ Type
Purpose of Disbursement <u>Website Preparation</u>		
Candidate Name <u>Bill Luter</u>		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: <u>WV</u> District: <u>3</u>	

B. <u>Jason Crimmel</u> Full Name (Last, First, Middle Initial)		Date of Disbursement <u>12 ' 13 ' 2011</u>
Mailing Address <u>2202 Mount Vernon Rd</u>		Amount of Each Disbursement this Period <u>750.00</u>
City <u>Hurricane</u>	State <u>WV</u>	
Zip Code <u>25526</u>		004 Category/ Type
Purpose of Disbursement <u>Website Preparation</u>		
Candidate Name <u>Bill Luter</u>		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: <u>WV</u> District: <u>3</u>	

C. <u>WV Secretary of State</u> Full Name (Last, First, Middle Initial)		Date of Disbursement <u>01 ' 19 ' 2012</u>
Mailing Address <u>1900 Kanawha Blvd E. Bld. 1 Suite 157-K</u>		Amount of Each Disbursement this Period <u>1740.00</u>
City <u>Charleston</u>	State <u>WV</u>	
Zip Code <u>25305</u>		001 Category/ Type
Purpose of Disbursement <u>Filing Fee</u>		
Candidate Name <u>Bill Luter</u>		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: <u>WV</u> District: <u>3</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>3,240.00</u>
TOTAL This Period (last page this line number only).....	<u>11,325.14</u>

12030800812

**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 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)
Committee to Elect Bill Luten Congressman

12030800813

A. Jason Crimmel Full Name (Last, First, Middle Initial)		Date of Disbursement 01'12'2012
Mailing Address 2022 Mount Vernon Rd		Amount of Each Disbursement this Period , 150.00
City Hurricane	State WV	
Zip Code 25526		Category/ Type 004
Purpose of Disbursement Website Maintenance		
Candidate Name Bill Luten		
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: WV District: 03		

B. Jason Crimmel Full Name (Last, First, Middle Initial)		Date of Disbursement 02'22'2012
Mailing Address 2022 Mount Vernon Rd.		Amount of Each Disbursement this Period , 150.00
City Hurricane	State WV	
Zip Code 25526		Category/ Type 004
Purpose of Disbursement Website Maintenance		
Candidate Name Bill Luten		
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: WV District: 03		

C. Big Daddys Signs Full Name (Last, First, Middle Initial)		Date of Disbursement 02'22'2012
Mailing Address 1399 Green Forest Ct. Suite 409		Amount of Each Disbursement this Period , 1,295.07
City Winter Garden	State FL	
Zip Code 34787		Category/ Type 006
Purpose of Disbursement Signs		
Candidate Name Bill Luten		
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: WV District: 03		

SUBTOTAL of Disbursements This Page (optional).....	, 1,595.07
TOTAL This Period (last page this line number only).....	, 11,325.14

**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)			
	<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)
Committee to Elect Bill Lottin Congressman

Full Name (Last, First, Middle Initial) A. Jason Crimmel		Date of Disbursement 03' 16' 2012
Mailing Address 2022 Mount Vernon Rd		Amount of Each Disbursement this Period , , 150.00
City Hurricane	State WV	
Purpose of Disbursement Website maintenance		Category/ Type 004
Candidate Name Bill Lottin		
Office Sought: <input 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: WV	District: 03	

Full Name (Last, First, Middle Initial) B. Tucker Reynolds		Date of Disbursement 04' 01' 2012
Mailing Address 211 Dean Street		Amount of Each Disbursement this Period , , 800.00
City Beckley	State WV	
Purpose of Disbursement rent		Category/ Type 001
Candidate Name Bill Lottin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV	District: 03	

Full Name (Last, First, Middle Initial) C. Mason County Chamber of Commerce		Date of Disbursement 04' 03' 2012
Mailing Address 305 Main Street		Amount of Each Disbursement this Period , , 50.00
City Point Pleasant	State WV	
Purpose of Disbursement Dinner		Category/ Type 007
Candidate Name Bill Lottin		
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: WV	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	, 1,000.00
TOTAL This Period (last page this line number only).....	, 11,323.14

12030800814

**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 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)
Committee to Elect Bill Lester Congressman

Full Name (Last, First, Middle Initial) <u>Big Daddy's Signs</u>		Date of Disbursement <u>04 ' 06 ' 2012</u>
Mailing Address <u>1319 Green Forest Ct. Suite 409</u>		Amount of Each Disbursement this Period <u>, 1,515.07</u>
City <u>Winter Garden</u>	State <u>FL</u> Zip Code <u>34787</u>	
Purpose of Disbursement <u>Signs</u>	Candidate Name <u>Bill Lester</u>	Category/ Type <u>006</u>
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: <u>WV</u> District: <u>03</u>		

Full Name (Last, First, Middle Initial) <u>WVNS-TV</u>		Date of Disbursement <u>04 ' 11 ' 2012</u>
Mailing Address <u>PO Box 509</u>		Amount of Each Disbursement this Period <u>, 3,825.00</u>
City <u>Ghent</u>	State <u>WV</u> Zip Code <u>25843</u>	
Purpose of Disbursement <u>Commercial</u>	Candidate Name <u>Bill Lester</u>	Category/ Type <u>004</u>
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: <u>WV</u> District: <u>03</u>		

Full Name (Last, First, Middle Initial) <u>Jayon Crimmel</u>		Date of Disbursement <u>04 ' 13 ' 2012</u>
Mailing Address <u>2022 Mount Vernon Rd.</u>		Amount of Each Disbursement this Period <u>, 150.00</u>
City <u>Hurricane</u>	State <u>WV</u> Zip Code <u>25526</u>	
Purpose of Disbursement <u>Website maintenance</u>	Candidate Name <u>Bill Lester</u>	Category/ Type <u>004</u>
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: <u>WV</u> District: <u>03</u>		

SUBTOTAL of Disbursements This Page (optional).....	<u>, 5,490.07</u>
TOTAL This Period (last page this line number only).....	<u>, 11,325.14</u>

12030800815

**SCHEDULE C (FEC Form 3)
LOANS**

N/A

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

NAME OF COMMITTEE (In Full)
Committee to Elect Bill Heder Congressman

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address	

City	State	ZIP Code
------	-------	----------

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

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , , .

SUBTOTALS This Period This Page (optional)..... ▶	, , .
TOTALS This Period (last page in this line only)..... ▶	, , .

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

12030800816

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

N/A

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Committee to Elect Bill Luter Congressman		FEC IDENTIFICATION NUMBER C	
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan , , .	Interest Rate (APR) . %	
Mailing Address	Date Incurred or Established	M M / D D / Y Y Y Y	
City State Zip Code	Date Due	M M / D D / Y Y Y Y	

12030800817

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

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

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

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

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

**SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS**

N/A

Excluding Loans

NAME OF COMMITTEE (In Full)
Committee to Elect Bill Lester Congressman

A. 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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .

1) SUBTOTALS This Period This Page (optional)	▶	, , .
2) TOTALS This Period (last page this line number only)	▶	, , .
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	, , .
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	, , .

12030800818

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

N/A Only one committee

12030800819

Name of Principal Campaign Committee (In Full)		Report Covering Period: From: M M / D D / Y Y Y Y				To: M M / D D / Y Y Y Y
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						
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						
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						
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						
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						
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						
B						

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

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USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

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Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JMN
PREPARER

5/1/12
DATE PREPARED

12030800820