

# FEC FORM 3P

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

ROMNEY FOR PRESIDENT, INC.

ADDRESS (number and street)

C/O RED CURVE SOLUTIONS, LLC

500 CUMMINGS CENTER, SUITE 4400

Check if different than previously reported. (ACC)

BEVERLY

CITY

MA

STATE

01915

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00431171

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

Thirtieth day report following the General Election

on 11 / 04 / 2014

Twelfth day report preceding election

on / / in the State of

Is this Report an Amendment?

yes

no

5. Covering Period

10 / 16 / 2014

through

11 / 24 / 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

Darrell Crate

Signature of Treasurer

Darrell Crate

[Electronically Filed]

Date

12 / 04 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

**ROMNEY FOR PRESIDENT, INC.**

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

**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	<input type="text" value="890402.46"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	<input type="text" value="1329382.75"/>
8. SUBTOTAL (Lines 6 and 7) .....	<input type="text" value="2219785.21"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	<input type="text" value="43601.59"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="2176183.62"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION .....	<input type="text" value="0.00"/>

**NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES**

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	<input type="text" value="-617988.26"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="16330140.35"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3PN

Transaction ID :

This statement is in reference to the Committee's 2014 Post-General Report. Disbursements on this report include expenses necessary for the maintenance and wind-down of the Committee. Regarding Transaction ID SB29.05, the corresponding disbursement for this in-kind contribution was made after the close of the reporting period and thus will be reported on the Committee's Year End report.

Form/Schedule:

Transaction ID:

## POST-ELECTION DETAILED SUMMARY PAGE Report Of Receipts And Disbursements

FEC Form 3P

\* If the candidate participated in the general election, use this form for the 30-day Post-General report.  
 \* If the candidate did NOT participate in the general election, use this form for the Year-End report covering through December 31 of the election year (due on January 31).  
 This form is used in lieu of filling out Line Numbers 14 and 15 on the Report of Receipts and Disbursements (Summary Page) and Page 2 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

NAME OF COMMITTEE (in Full)  
**ROMNEY FOR PRESIDENT, INC.**

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

COLUMN A Total This Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
<b>I. RECEIPTS</b>		
16. FEDERAL FUNDS (Itemize on Schedule A-P)		
0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized	440290.98	
(ii) Unitemized	214971.78	
(iii) Total Contributions	655262.76	0.00
(b) Political Party Committees	0.00	
(c) Other Political Committees	38713.49	
(d) The Candidate	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	693976.25	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	3490846.12	

## POST-ELECTION DETAILED SUMMARY PAGE Report Of Receipts And Disbursements

COLUMN A Total This Period	COLUMN B Election Cycle Total as of* (date of general election)	COLUMN C Total for* (date after general election) through* (last day of reporting period)
* - See page 3 for date		
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate		
0.00	0.00	
(b) Other Loans		
0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))		
0.00	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating		
3740.80	7285341.61	3740.80
(b) Fundraising		
0.00	0.00	
(c) Legal and Accounting		
0.00	0.00	
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))		
3740.80	7285341.61	3740.80
21. OTHER RECEIPTS (Dividends, Interest, etc.)		
1325641.95	3598579.11	1321415.81
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)		
1329382.75	15068743.09	1325156.61

### II. DISBURSEMENTS

23. OPERATING EXPENDITURES

37601.59	23615481.96	28000.00
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24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES

0.00	444686.59	
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25. FUNDRAISING DISBURSEMENTS

0.00	0.00	
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26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS

0.00	0.00	
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## POST-ELECTION DETAILED SUMMARY PAGE Report Of Receipts And Disbursements

COLUMN A Total This Period	COLUMN B Election Cycle Total as of* (date of general election)	COLUMN C Total for* (date after general election) through* (last day of reporting period)
27. LOAN REPAYMENTS MADE:		* - See page 3 for date
(a) Repayments of Loans Made or Guaranteed by Candidate		
0.00	0.00	
(b) Other Repayments		
0.00	1500000.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		
0.00	1500000.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	1281800.02	
(b) Political Party Committees		
0.00	0.00	
(c) Other Political Committees		
0.00	30164.49	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))		
0.00	1311964.51	0.00
29 OTHER DISBURSEMENTS		
6000.00	184865.62	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		
43601.59	27056998.68	28000.00

### III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #14 on Summary Page for this report only; subtract Line 28(d) from Line 17(e))

0.00	-617988.26	0.00
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### IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #15 on Summary Page for this report only; subtract Line 20(a) from Line 23)

33860.79	16330140.35	24259.20
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### V. CONTRIBUTED ITEMS (Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)

0.00		
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FEC FORM 3P  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES  
BY STATE FOR  
A PRESIDENTIAL CANDIDATE**  
(Used Only by Primary Committees Receiving  
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00431171

ROMNEY FOR PRESIDENT, INC.

ADDRESS (number and street)

C/O RED CURVE SOLUTIONS, LLC

500 CUMMINGS CENTER, SUITE 4400

BEVERLY

CITY

MA

STATE

01915

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00



<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" 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)  
**ROMNEY FOR PRESIDENT, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**BEN SASSE FOR US SENATE**

Mailing Address 105 E. 6TH STREET

City State Zip Code  
FREMONT NE 68025

FEC ID number of contributing federal political committee. **C** C00547976

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3740.80

**Transaction ID : SA20A.001**

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 24 / 2014

CONTRIBUTION REFUND

Amount of Each Receipt this Period  
3740.80

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....▶ 3740.80

**Total This Period** (last page this line number only).....▶ 3740.80

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 11 / 18

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROMNEY FOR PRESIDENT, INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>FLS CONNECT, LLC</b>		<b>Transaction ID : SA21.001</b>	
Mailing Address 7300 HUDSON BLVD STE 270		Date of Receipt MM / DD / YYYY 10 / 27 / 2014	
City SAINT PAUL	State MN	Zip Code 55128	LIST RENTAL
FEC ID number of contributing federal political committee. C	Occupation		Amount of Each Receipt this Period 494.14
Name of Employer	Election Cycle-to-Date ▼ 35164.19		FAIR MARKET VALUE
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>GRANITE LISTS, LLC</b>		<b>Transaction ID : SA21.004</b>	
Mailing Address PO BOX 262		Date of Receipt MM / DD / YYYY 11 / 05 / 2014	
City DUBLIN	State NH	Zip Code 03444	LIST RENTAL
FEC ID number of contributing federal political committee. C	Occupation		Amount of Each Receipt this Period 49473.80
Name of Employer	Election Cycle-to-Date ▼ 520998.91		FAIR MARKET VALUE
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>NEWSMAX MEDIA</b>		<b>Transaction ID : SA21.002</b>	
Mailing Address 560 VILLAGE BLVD. STE 120		Date of Receipt MM / DD / YYYY 10 / 27 / 2014	
City WEST PALM BEACH	State FL	Zip Code 33409	LIST RENTAL
FEC ID number of contributing federal political committee. C	Occupation		Amount of Each Receipt this Period 3732.00
Name of Employer	Election Cycle-to-Date ▼ 60887.27		FAIR MARKET VALUE
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**Subtotal Of Receipts This Page** (optional).....▶ 53699.94

**Total This Period** (last page this line number only).....▶

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 12 / 18

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROMNEY FOR PRESIDENT, INC.**

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

Mailing Address 560 VILLAGE BLVD.  
STE 120

City State Zip Code  
WEST PALM BEACH FL 33409

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
60887.27

**Transaction ID : SA21.003**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2014			

LIST RENTAL

Amount of Each Receipt this Period

14065.67
----------

FAIR MARKET VALUE

**B.** Full Name (Last, First, Middle Initial)  
**TARGETED VICTORY**

Mailing Address 1033 N. FAIRFAX ST. SUITE 400

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1364933.12

**Transaction ID : SA21.005**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2014			

LIST RENTAL

Amount of Each Receipt this Period

1257876.34
------------

FAIR MARKET VALUE

**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

Amount of Each Receipt this Period

--

**Subtotal Of Receipts This Page** (optional).....▶ 1271942.01

**Total This Period** (last page this line number only).....▶ 1325641.95

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial) <b>A. AIR CHARTER TEAM, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2014
Mailing Address 4151 N. MULBERRY DR. SUITE 250		Transaction ID : <b>SB23.01</b>
City KANSAS CITY	State MO	
Purpose of Disbursement TRAVEL: AIR	Zip Code 64116	Amount of Each Disbursement this Period 8667.00
Candidate Name	Category/ Type	
Office Sought: <input 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: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address WORLD FINANCIAL CENTER 200 VESEY ST.		Transaction ID : <b>SB23.02</b>
City NEW YORK	State NY	
Purpose of Disbursement BANK FEE	Zip Code 10285	Amount of Each Disbursement this Period 9.15
Candidate Name	Category/ Type	
Office Sought: <input 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: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address WORLD FINANCIAL CENTER 200 VESEY ST.		Transaction ID : <b>SB23.05</b>
City NEW YORK	State NY	
Purpose of Disbursement MEMBERSHIP RENEWAL FEE	Zip Code 10285	Amount of Each Disbursement this Period 90.00
Candidate Name	Category/ Type	
Office Sought: <input 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: _____	District: _____	

Subtotal Of Receipts This Page (optional)..... 8766.15

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial) <b>A. BARNES AND NOBLE</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address PO BOX 111		<b>Transaction ID : SB23.09</b>
City LYNDHURST	State NJ	
Zip Code 07071	Purpose of Disbursement ONLINE SUBSCRIPTION	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/ Type	
Office Sought: <input 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:	District:	

Full Name (Last, First, Middle Initial) <b>B. DOCUSIGN</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 221 MAIN STREET		<b>Transaction ID : SB23.08</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement ONLINE SUBSCRIPTION	Amount of Each Disbursement this Period 509.75
Candidate Name	Category/ Type	
Office Sought: <input 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:	District:	

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		<b>Transaction ID : SB23.03</b>
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement NETWORK SERVICES	Amount of Each Disbursement this Period 75.00
Candidate Name	Category/ Type	
Office Sought: <input 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:	District:	

**Subtotal Of Receipts This Page** (optional)..... 609.75

**Total This Period** (last page this line number only).....

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		<b>Transaction ID : SB23.04</b>
City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period 75.69	
Purpose of Disbursement NETWORK SERVICES	Candidate Name	Category/Type
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		<b>Transaction ID : SB23.06</b>
City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement NETWORK SERVICES	Candidate Name	Category/Type
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		<b>Transaction ID : SB23.07</b>
City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement NETWORK SERVICES	Candidate Name	Category/Type
Office Sought: <input 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: District:		

**Subtotal Of Receipts This Page** (optional)..... 225.69

**Total This Period** (last page this line number only).....

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Transaction ID : <b>SB23.10</b>
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 18000.00	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Category/ Type
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 11 / 24 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Transaction ID : <b>SB23.11</b>
City BEVERLY State MA Zip Code 01915	Amount of Each Disbursement this Period 10000.00	
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Category/ Type
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID : <b>SB23.11</b>
City State Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input 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: District:		

Subtotal Of Receipts This Page (optional)..... 28000.00

Total This Period (last page this line number only)..... 37601.59



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23    24    25    26    27a  
 27b    28a    28b    28c    29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial)

**A. BEN SASSE FOR US SENATE, INC.**

Mailing Address PO BOX 1976  
SUITE 250

City State Zip Code  
FREMONT NE 68026

Purpose of Disbursement  
IN-KIND: TRAVEL: AIR

Candidate Name  
BENJAMIN E. SASSE

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NE District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 29 / 2014

Transaction ID : SB29.05

Amount of Each Disbursement this Period

5740.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE  
SUITE 250

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
IN-KIND: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 03 / 2014

Transaction ID : SB29.04

Amount of Each Disbursement this Period

8667.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JOHN CHAPMAN FOR CONGRESS**

Mailing Address 138 CONANT STREET

City State Zip Code  
BEVERLY MA 01915

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name  
JOHN C. CHAPMAN

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: MA District: 09

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 16 / 2014

Transaction ID : SB29.01

Amount of Each Disbursement this Period

2000.00

Subtotal Of Receipts This Page (optional)..... 2000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**ROMNEY FOR PRESIDENT, INC.**

Full Name (Last, First, Middle Initial) <b>A. POLIQUIN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 21 / 2014
Mailing Address PO BOX 50		Transaction ID : <b>SB29.03</b>
City OAKLAND	State ME	
Purpose of Disbursement FEDERAL CONTRIBUTION	Zip Code 04963	Amount of Each Disbursement this Period 2000.00
Candidate Name BRUCE L. POLIQUIN	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ME	District: 02	

Full Name (Last, First, Middle Initial) <b>B. TISEI CONGRESSIONAL COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2014
Mailing Address 182 NEWBURY STREET		Transaction ID : <b>SB29.02</b>
City PEABODY	State MA	
Purpose of Disbursement FEDERAL CONTRIBUTION	Zip Code 01960	Amount of Each Disbursement this Period 2000.00
Candidate Name RICHARD R. TISEI	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 06	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID : <b>SB29.01</b>
City	State	
Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	
Office Sought: <input 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:	District:	

Subtotal Of Receipts This Page (optional)..... 4000.00

Total This Period (last page this line number only)..... 6000.00