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SECRETARY OF THE SENATE  
14 OCT 27 PM 1:29

October 17, 2014

Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington, DC 20510-7116


To Whom It May Concern:

Enclosed herewith is the Report of Receipts and Disbursements for an Authorized Committee, FEC Form 3, covering the period from 7/1/2014 through 7/30/2014. This is the Committee's Pre-Election Report for the Primary. This report is submitted by the Charlie Hardy for Senate campaign committee, FEC Identification Number C00554758.

This report is also submitted to cure the deficiency documented in the FEC's letter dated October 3, 2014.

Please note that the Committee will shortly file an amended Quarterly Report for Q3 (October 15, 2014), to adjust that report to reflect that the covered period is 7/31/2014 through 9/30/2014.

Sincerely,

  
David Finley

Treasurer

Charlie Hardy for Senate

Encl.

RECEIVED  
SECRETARY'S OFFICE  
14 OCT 27 PM 1:30

**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

CHARLIE HARDY FOR SENATE

ADDRESS (number and street)

1901 CENTRAL AVE #A

Check if different than previously reported. (ACC)

CHEYENNE

WY

82001

2. FEC IDENTIFICATION NUMBER ▼

C 00554758

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT

WY

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

08 19 2014

in the State of

WY

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07 01 2014

through

07 30 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

DAVID FINLEY

Signature of Treasurer

David Finley

Date

10 17 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.

Office Use Only

FEC FORM 3  
(Revised 02/2003)

14021203834

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**CHARLIE HARDY FOR SENATE**

Report Covering the Period: From: **07 01 2014** To: **07 30 2014**

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))...	3,007.13	26,856.03
(b) Total Contribution Refunds (from Line 20(d)) ...	0.00	983.60
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	3,007.13	25,872.43
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	3,301.19	52,474.49
(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))...	3,301.19	52,474.49
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	<b>2,607.35</b>	
<b>9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)...</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)...</b>	<b>43,663.99</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

14021203835

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

**CHARLIE HARDY FOR SENATE**

Report Covering the Period: From: <sup>M</sup>07 <sup>D</sup>01 <sup>Y</sup>2014 To: <sup>M</sup>07 <sup>D</sup>30 <sup>Y</sup>2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) ...	1,500.00	12,286.68
(ii) Unitemized .....	1,507.13	14,569.35
(iii) TOTAL of contributions from individuals ▶	3,007.13	26,856.03
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3,007.13	26,856.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	29,209.41
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	29,209.41
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)...	3,007.13	56,065.44

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**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	3,301.19	52,474.49
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	983.60
(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	983.60
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	3,301.19	53,458.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	2,901.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	3,007.13
25. SUBTOTAL (add Line 23 and Line 24)...	5,908.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	3,301.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2,607.35

14021203837

**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 25						
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First; Middle Initial) <b>A. ALLBRIGHT, JOSEPH</b>			Date of Receipt <b>07 05 2014</b>
Mailing Address <b>PO BOX 9760</b>			Amount of Each Receipt this Period <b>500.00</b>
City <b>JACKSON</b>	State <b>WY</b>	Zip Code <b>83002</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>FLAT CREEK RANCH</b>	Occupation <b>OWNER</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First; Middle Initial) <b>B. KUNSTEL, MARCIA</b>			Date of Receipt <b>07 05 2014</b>
Mailing Address <b>PO BOX 9760</b>			Amount of Each Receipt this Period <b>500.00</b>
City <b>JACKSON</b>	State <b>WY</b>	Zip Code <b>83002</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>FLAT CREEK RANCH</b>	Occupation <b>OWNER</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First; Middle Initial) <b>C. JOURGENSEN, PETER</b>			Date of Receipt <b>07 21 2014</b>
Mailing Address <b>PO BOX 9550</b>			Amount of Each Receipt this Period <b>250.00</b>
City <b>JACKSON</b>	State <b>WY</b>	Zip Code <b>83002</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14021203838

**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 <b>6</b> OF <b>25</b>
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. JORGENSEN, JEAN</b>		Date of Receipt <b>07 21 2014</b>
Mailing Address <b>PO BOX 9550</b>		
City <b>JACKSON</b>	State <b>WY</b>	Zip Code <b>83002</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>, 250.00</b>
Name of Employer <b>RETIRED</b>	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>, 250.00</b>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt <b>"</b>
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		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) <b>C.</b>		Date of Receipt <b>M M Y</b>
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>, 250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>, 1,500.00</b>

14021203839

**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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement <b>07 07 2014</b>	
Mailing Address <b>PO BOX 297812</b>		Amount of Each Disbursement this Period <b>233.00</b>	
City <b>FT. LAUDERDALE</b>	State <b>FL</b>		Zip Code <b>33329-7812</b>
Purpose of Disbursement <b>CREDIT CARD PAYMENT-SEE BELOW 001</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b> District:			

Full Name (Last, First, Middle Initial) <b>B. GASAMAT</b>		Date of Disbursement <b>05 30 2014</b>	
Mailing Address <b>620 E. 16th ST</b>		Amount of Each Disbursement this Period <b>31.35</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VAN</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b> District:			

Full Name (Last, First, Middle Initial) <b>C. WYOMING TROPHY &amp; ENGRAVING</b>		Date of Disbursement <b>05 30 2014</b>	
Mailing Address <b>1620 THOMAS AVE.</b>		Amount of Each Disbursement this Period <b>590.53</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>PRINTING CAMPAIGN MATERIALS</b>			Category/ Type
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b> District:			

SUBTOTAL of Disbursements This Page (optional).....	<b>233.00</b>
TOTAL This Period (last page this line number only).....	

14021203840



**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 <b>6</b> OF <b>25</b>
	<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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. GASAMAT</b>		Date of Disbursement <b>05 31 2014</b>	
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>10.12</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>FUEL FOR CAMPAIGN VEHICLE</b>	Category/Type		
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>B. OFFICE DEPOT</b>		Date of Disbursement <b>06 04 2014</b>	
Mailing Address <b>1225 DEL RANGE BLVD.</b>		Amount of Each Disbursement this Period <b>44.06</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>CAMPAIGN PRINTING</b>	Category/Type		
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement <b>06 08 2014</b>	
Mailing Address <b>FRONTIER MALL</b>		Amount of Each Disbursement this Period <b>220.93</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>	
City <b>CHEYENNE</b>	State <b>WY</b>		Zip Code <b>82001</b>
Purpose of Disbursement <b>TELEPHONE</b>	Category/Type		
Candidate Name <b>CHARLIE HARDY</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>WY</b>	District:		

SUBTOTAL of Disbursements This Page (optional).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

14021203841

**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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. OFFICE DEPOT</b>		Date of Disbursement <b>06 08 2014</b>
Mailing Address <b>1225 DEL RANGE BLVD.</b>		Amount of Each Disbursement this Period <b>317</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>OFFICE SUPPLIES</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. GASAMAT</b>		Date of Disbursement <b>06 08 2014</b>
Mailing Address <b>020 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>4062</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014.</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>GAS FOR CAMPAIGN VEHICLE</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: <b>WY</b>	District:	

Full Name (Last, First, Middle Initial) <b>C. GASAMAT</b>		Date of Disbursement <b>06 21 2014</b>
Mailing Address <b>620 E. 16th ST.</b>		Amount of Each Disbursement this Period <b>3866</b> <b>MEMO-AMEX CREDIT CARD PAYMENT DATED 07/07/2014</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>GAS FOR CAMPAIGN VEHICLE</b>	Category/Type	
Candidate Name <b>CHARLIE HARDY</b>		
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: <b>WY</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

14021203842

**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	<input type="checkbox"/> 18	<input type="checkbox"/> 18a	<input type="checkbox"/> 18b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 10 OF 25

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NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial)

**A. REMAX CAPITOL PROPERTIES**

Date of Disbursement: **07 08 2014**

Mailing Address: **4000 CENTRAL AVE.**

City: **CHEYENNE WY** State Zip Code: **82001**

Purpose of Disbursement: **CAMPAIGN OFFICE RENTAL**

Candidate Name: **CHARLIE HARDY** Category/Type

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

State: **WY** District:

Amount of Each Disbursement this Period: **900.00**

Full Name (Last, First, Middle Initial)

**B. REMAX CAPITOL PROPERTIES**

Date of Disbursement: **07 08 2014**

Mailing Address: **4000 CENTRAL AVE.**

City: **CHEYENNE WY** State Zip Code: **82001**

Purpose of Disbursement: **CAMPAIGN STAFF APT. RENTAL**

Candidate Name: **CHARLIE HARDY** Category/Type

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

State: **WY** District:

Amount of Each Disbursement this Period: **1,100.00**

Full Name (Last, First, Middle Initial)

**C. WILKINSON, BRUCE**

Date of Disbursement: **07 01 2014**

Mailing Address: **816 ADAMS ST. SE**

City: **OLYMPIA WA** State Zip Code: **98501**

Purpose of Disbursement: **CAMPAIGN VEHICLE LOANED VALUE**

Candidate Name: **CHARLIE HARDY** Category/Type

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

State: **WY** District:

Amount of Each Disbursement this Period: **187.13**  
**IN-KIND**

SUBTOTAL of Disbursements This Page (optional)..... **2,000.00**

TOTAL This Period (last page this line number only)..... **2,187.13**

14021203843

**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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. SOWADA, BARBARA</b>		Date of Disbursement M M / D D Y Y Y Y <b>07 26 2014</b>
Mailing Address		Amount of Each Disbursement this Period <b>210.00</b>
City <b>ROCKSPRINGS</b> State <b>WY</b> Zip Code <b>82901</b>	Purpose of Disbursement <b>PARADE PERMIT + ADVERTISING</b>	
Candidate Name <b>CHARLIE HARDY</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <b>WY</b> District:	

Full Name (Last, First, Middle Initial) <b>B. WILKERSON, BRUCE</b>		Date of Disbursement M M / D D Y Y Y Y <b>07 15 2014</b>
Mailing Address <b>816 ADAMS ST. SE</b>		Amount of Each Disbursement this Period <b>640.79</b>
City <b>OLYMPIA</b> State <b>WA</b> Zip Code <b>98501</b>	Purpose of Disbursement <b>CAMPAIGN VEH. FUEL REIMB.</b>	
Candidate Name <b>CHARLIE HARDY</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <b>WY</b> District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>850.79</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14021203844

**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 <u>17</u> OF <u>25</u>
	<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)  
**CHARLIE HARDY FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>07 08 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>900.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>CAMPAIGN OFFICE RENTAL</b>		
Candidate Name <b>CHARLIE HARDY</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>B. REMAX CAPITOL PROPERTIES</b>		Date of Disbursement <b>07 08 2014</b>
Mailing Address <b>4000 CENTRAL AVE.</b>		Amount of Each Disbursement this Period <b>1,100.00</b>
City <b>CHEYENNE WY</b>	State <b>WY</b>	
Zip Code <b>82001</b>		
Purpose of Disbursement <b>CAMPAIGN STAFF APT. RENTAL</b>		
Candidate Name <b>CHARLIE HARDY</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WY</b> District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
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 Disbursements This Page (optional).....	<b>2,000.00</b>
TOTAL This Period (last page this line number only).....	<b>5,270.92</b>

14021203845

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

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

PAGE **13** OF **25**

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - PERSONAL FUNDS**

Election:  Primary  
General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>80941</b>	<b>000</b>	<b>80941</b>

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
<b>VARIOUS</b>	<b>NO DUE DATE</b>	<b>000 % (apr)</b>	<input checked="" 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.

14021203846

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

PAGE 14 OF 25

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>4500.00</b>	<b>0.00</b>	<b>4500.00</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>02 05 2014</b>	<b>NO DUE DATE</b>	<b>0.00 % (apr)</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b> State <b>WY</b> ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>4500.00</b>

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.

14021203847

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

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

PAGE 15 OF 25

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (in Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>9,500.00</b>	<b>0.00</b>	<b>9,500.00</b>

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
<b>02 14 2014</b>	<b>NO DUE DATE</b>	<b>0.00 % (apr)</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b> State <b>WY</b> ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>9,500.00</b>
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.

14021203848



**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**250 00**

Cumulative Payment To Date

**0 00**

Balance Outstanding at Close of This Period

**250 00**

TERMS

Date Incurred

**04 04 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0.00 % (apr)**

Secured:

Yes  No

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

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

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed  
Outstanding:

**250 00**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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.

14021203849

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E - CREDIT CARD ADVANCE**

Election:  
 Primary  
General  
Other (specify) ▾

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>3500.00</b>	<b>0.00</b>	<b>3500.00</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>04 16 2014</b>	<b>NO DUE DATE</b>	<b>0.00 % (apr)</b>	Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) <b>GONZALES, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>3500.00</b>
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.

14021203850

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

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

PAGE **18** OF **25**

FOR LINE NUMBER: (check only one)  13a  13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>1500.00</b>	<b>0.00</b>	<b>1500.00</b>

TERMS Date Incurred Date Due Interest Rate Secured:  
**04 21 2014 NO DUE DATE 0.00 % (apr) Yes  No**

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>1500.00</b>
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.

14021203851

SCHEDULE C (FEC Form 3)  
LOANS

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

FOR LINE NUMBER  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
CHARLIE HARDY FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial)  
HARDY, CHARLESE.- CREDIT CARD ADVANCE

Election:  
 Primary  
 General  
Other (specify) ▾

Mailing Address  
PO BOX 1951

City CHEYENNE State WY ZIP Code 82003-1951

Original Amount of Loan 900 00 Cumulative Payment To Date 000 Balance Outstanding at Close of This Period 900 00

TERMS Date Incurred 04 25 2014 Date Due NO DUE DATE Interest Rate 000 % (apr) Secured:  Yes  No

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

1. Full Name (Last, First, Middle Initial) GONZALEZ, SUSANA	Name of Employer UNEMPLOYED
Mailing Address PO BOX 1951	Occupation
City CHEYENNE State WY ZIP Code 82001	Amount Guaranteed Outstanding: 900 00
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.

14021203852

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (in Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary  
 General  
Other (specify) ▼

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**1 0 0 0 0 0**

Cumulative Payment To Date

**0 0 0**

Balance Outstanding at Close of This Period

**1 0 0 0 0 0**

TERMS

Date Incurred

**05 01 2014**

Date Due

**NO DUE DATE**

Interest Rate

**0 0 0 % (apr)**

Secured:

Yes  No

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

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

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed  
Outstanding:

**1 0 0 0 0 0**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed  
Outstanding:

City

State

ZIP Code

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.

14021203853

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (in Full)

**CHARLIE HARDY FOR SENATE**

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

**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:

Primary

General

Other (specify) ▼

Mailing Address

**PO BOX 1951**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82003-1951**

Original Amount of Loan

**100000**

Cumulative Payment To Date

**000**

Balance Outstanding at Close of This Period

**100000**

TERMS

Date Incurred

**05 02 2014**

Date Due

**NO DUE DATE**

Interest Rate

**000 % (apr)**

Secured:

Yes  No

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

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

**GONZALEZ, SUSANA**

Name of Employer

**UNEMPLOYED**

Mailing Address

**PO BOX 1951**

Occupation

Amount

Guaranteed Outstanding:

**100000**

City

**CHEYENNE**

State

**WY**

ZIP Code

**82001**

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed Outstanding:

City

State

ZIP Code

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

Name of Employer

Mailing Address

Occupation

Amount

Guaranteed Outstanding:

City

State

ZIP Code

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.

14021203854

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

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

PAGE 22 OF 25  
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. CREDIT CARD ADVANCE**

Mailing Address  
**PO BOX 1951**

Election:  
 Primary  
 General  
Other (specify) ▾

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>340000</b>	<b>000</b>	<b>340000</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>05 23 2014</b>	<b>NO DUE DATE</b>	<b>000 % (APR)</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>340000</b>
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.

14021203855

**SCHEDULE C (FEC Form 3)**

**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
Other (specify) ▼

Mailing Address  
**PO BOX 1951**

City **CHEYENNE** State **WY** ZIP Code **82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>350 00</b>	<b>000</b>	<b>350 00</b>

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	<b>06 05 2014</b>	<b>NO DUE DATE</b>	<b>000 % (apr)</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City <b>CHEYENNE</b> State <b>WY</b> ZIP Code <b>82001</b>	Amount Guaranteed Outstanding: <b>350 00</b>
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.

14021203856



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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**CHARLIE HARDY FOR SENATE**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
**HARDY, CHARLES E. - CREDIT CARD ADVANCE**

Election:  
 Primary  
 General  
 Other (specify) \_\_\_\_\_

Mailing Address  
**PO BOX 1951**

City State ZIP Code  
**CHEYENNE WY 82003-1951**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000	000	250000

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	06 27 2014	NO DUE DATE	000 % (apr)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

1. Full Name (Last, First, Middle Initial) <b>GONZALEZ, SUSANA</b>	Name of Employer <b>UNEMPLOYED</b>
Mailing Address <b>PO BOX 1951</b>	Occupation
City State ZIP Code <b>CHEYENNE WY 82001</b>	Amount Guaranteed Outstanding: <b>250000</b>
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)..... ▶

**79 209 41**

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

14021203857

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

Supplementary for  
 Information found on  
 Page 14 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00 554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>4500 00</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>BOX 15123</b>	Date Incurred or Established <b>02 05 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **4500 00** Total Outstanding Balance: **4500 00**

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: \_\_\_\_\_ 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <i>David Finley</i>	DATE <b>10 13 2014</b>
---	---------------------------

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
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14021203858

**SCHEDULE C-1 (FEC Form 3)**

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
Information found on  
Page 15 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00 554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>950000</b>	Interest Rate (APR) <b>0.00</b>
	Mailing Address <b>BOX 15123</b>	Date Incurred or Established <b>02 14 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>	

A. Has loan been restructured?  No  Yes If yes, date originally incurred **10/12**

B. If line of credit,  
Amount of this Draw: **950000** Total Outstanding Balance: **950000**

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: \_\_\_\_\_ 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER  
Typed Name **DAVID FINLEY** DATE **10 13 2014**  
Signature **David Finley**

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
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14021203859

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

Supplementary for  
 information found on  
 Page 10 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>.250 00</b>	Interest Rate (APR) <b>0 00</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 04 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: **.250 00** Total Outstanding Balance: **250 00**

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account:  
 Address:  
 Date account established:  
 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

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
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14021203860

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

Supplementary for  
 information found on  
 Page 15 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>		FEC IDENTIFICATION NUMBER <b>C 00554758</b>
LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>3,500.00</b>	Interest Rate (APR) <b>0.00 %</b>
Mailing Address <b>PO BOX 1929</b>	Date Incurred or Established <b>04 16 2014</b>	
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>	

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: **3,500.00** Total Outstanding Balance: **3,500.00**

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER  
 Typed Name **DAVID FINLEY** DATE  
 Signature **David Finley** **10 13 2014**

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		DATE
Typed Name	Title	
Signature		

14021203861

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

Supplementary for  
 information found on  
 Page 18 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1500 00</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 21 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **1500 00** Total Outstanding Balance: **1500 00**

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

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
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14021203852

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

Supplementary for  
 Information found on  
 Page 19 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>		FEC IDENTIFICATION NUMBER <b>C00554758</b>
LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>90000</b>	Interest Rate (APR) <b>000</b>
Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>04 25 2014</b>	Date Due <b>NO DUE DATE</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>		

A. Has loan been restructured?  No  Yes If yes, date originally incurred \_\_\_\_\_

B. If line of credit,  
 Amount of this Draw: **900 00** Total Outstanding Balance: **900 00**

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral? \_\_\_\_\_  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b>	DATE <b>10 13 2014</b>
Signature <i>David Finley</i>	

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		DATE
Typed Name	Title	
Signature		

14021203863

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

Supplementary for  
 Information found on  
 Page 20 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C00554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1000 00</b>	Interest Rate (APR) <b>0 00</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 01 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **1-000 00** Total Outstanding Balance: **1 000 00**

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: \_\_\_\_\_ 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b>	DATE <b>10 13 2014</b>
Signature <i>David Finley</i>	

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
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14021203864



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

Supplementary for  
 Information found on  
 Page 21 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00 554758</b>
--	---

LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>1 000 00</b>	Interest Rate (APR) <b>000</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 02 2014</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **1 000 00** Total Outstanding Balance: **1 000 00**

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

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_  
 What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_  
 What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date account established: \_\_\_\_\_  
 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

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
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14021203865

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

Supplementary for  
 Information found on  
 Page 22 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00 554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>3400 00</b>	Interest Rate (APR) <b>0 00</b>
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Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>05 23 2014</b>
City <b>WILMINGTON</b> State Zip Code <b>DE 19850</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **3400 00** Total Outstanding Balance: **340 000**

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

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

What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No Yes

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

What is the estimated value?  
 \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:  
 Address:  
 Date account established: 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
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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
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14021203866

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

Supplementary for  
 Information found on  
 Page 23 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>		FEC IDENTIFICATION NUMBER <b>C 00 55 47 58</b>
LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>350 00</b>	Interest Rate (APR) <b>000</b>
Mailing Address <b>PO BOX 15123</b> City <b>WILMINGTON DE 19850</b>	Date Incurred or Established <b>06 05 2014</b>	Date Due <b>NO DUE DATE</b>

A. Has loan been restructured?  No  Yes If yes, date originally incurred \_\_\_\_\_

B. If line of credit,  
 Amount of this Draw: **350 00** Total Outstanding Balance: **350 00**

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: \_\_\_\_\_ 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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

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		DATE
Typed Name	Title	
Signature		

14021203867

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

Supplementary for  
 Information found on  
 Page 24 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>CHARLIE HARDY FOR SENATE</b>	FEC IDENTIFICATION NUMBER <b>C 00554758</b>
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LENDING INSTITUTION (LENDER) Full Name <b>CHASE</b>	Amount of Loan <b>2500 00</b>	Interest Rate (APR) <b>000</b>
Mailing Address <b>PO BOX 15123</b>	Date Incurred or Established <b>06 27 2014</b>	Date Due <b>NO DUE DATE</b>
City <b>WILMINGTON</b> State <b>DE</b> Zip Code <b>19850</b>		

A. Has loan been restructured?  No Yes If yes, date originally incurred

B. If line of credit,  
 Amount of this Draw: **2500 00** Total Outstanding Balance: **2500 00**

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

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

What is the value of this collateral?  
 Does the lender have a perfected security interest in it? No Yes

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

What is the estimated value?  
 \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).  
 Location of account: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Date account established: \_\_\_\_\_

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.  
**PERSONAL GUARANTEE OF CHARLIE HARDY**

G. COMMITTEE TREASURER Typed Name <b>DAVID FINLEY</b> Signature <b>David Finley</b>	DATE <b>10 13 2014</b>
---	---------------------------

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
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14021203853

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**CHARLIE HARDY FOR SENATE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RAW IMAGE</b>		Nature of Debt (Purpose): <b>CAMPAIGN VIDEOS AND WEB SITE DEVELOPMENT</b>
Mailing Address <b>525 HAMPTON LANE</b>		
City <b>KEY BISCANE, FL</b>	State <b>FL</b>	

Outstanding Balance Beginning This Period			
	<b>2,462.09</b>		
Amount Incurred This Period	<b>0.00</b>	Payment This Period	<b>0.00</b>
			Outstanding Balance at Close of This Period
			<b>2,462.09</b>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CITICARDS</b>		Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>
Mailing Address <b>BOX 6500</b>		
City <b>SIOUX FALLS, SD</b>	State <b>SD</b>	

Outstanding Balance Beginning This Period			
	<b>1,450.51</b>		
Amount Incurred This Period	<b>0.00</b>	Payment This Period	<b>0.00</b>
			Outstanding Balance at Close of This Period
			<b>1,450.51</b>


C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AMEX</b>		Nature of Debt (Purpose): <b>CREDIT CARD DEBT</b>
Mailing Address <b>PO BOX 297812</b>		
City <b>FT. LAUDERDALE</b>	State <b>FL</b>	

Outstanding Balance Beginning This Period			
	<b>9,504.07</b>		
Amount Incurred This Period	<b>1,270.91</b>	Payment This Period	<b>233.00</b>
			Outstanding Balance at Close of This Period
			<b>10,541.98</b>

1) SUBTOTALS This Period This Page (optional).....	
2) TOTALS This Period (last page this line number only)...	<b>14,454.58</b>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	<b>29,209.41</b>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<b>43,663.99</b>

14021203869

NEVY  
REASURER  
TARLUE HADY FOR SENATE  
901 CENTRAL AVE #4A  
EYENUSE, WY 82001


U. S. SENATE  
TRACKING NUMBER  
  
13-062032

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OCT 23 2014


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NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT  
HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

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USPS PRIORITY MAIL \_\_\_\_\_  
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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

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OVERNIGHT DELIVERY SERVICE:

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

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Date of Receipt

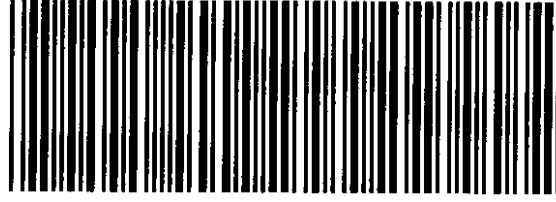
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

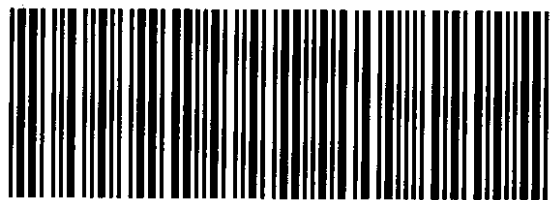
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **MN** DATE PREPARED **10/27/14**

14021203871



SEN PATCH



SEN PATCH

14021203872