

14 APR 21 AM 10:09

Office Use Only

FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

Bart McLeay for U.S. Senate, Inc.

ADDRESS (number and street)

P.O. Box 540788

Check if different than previously reported. (ACC)

Omaha

NE

68154

2. FEC IDENTIFICATION NUMBER

C 00547406

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NE

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

in the State of

XX

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY
01 / 01 / 2014

through

MM / DD / YYYY
03 / 31 / 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 Robert C. McChesney

Signature of Treasurer

Robert C. McChesney

Date

MM / DD / YYYY
04 / 13 / 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.

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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Bart McLeay for U.S. Senate, Inc.

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2014

To:

MM / DD / YYYY
03 / 31 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))...	118222.33	503946.29
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	118222.33	503696.29
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	209272.69	406708.61
(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))...	209272.69	406708.61
8. Cash on Hand at Close of Reporting Period (from Line 27)...	148987.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	52000.00	

For further information contact:

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

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

14020294842

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 116

Write or Type Committee Name

Bart McLeay for U.S. Senate, Inc.

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2014

To:

MM / DD / YYYY
03 / 31 / 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) ...

106653.33

452470.61

(ii) Unitemized

11569.00

39875.68

(iii) TOTAL of contributions from individuals ...

118222.33

492346.29

(b) Political Party Committees...

0.00

0.00

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

0.00

11600.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

118222.33

503946.29

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ...

0.00

0.00

13. LOANS:

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

0.00

52000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

52000.00

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

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

118222.33

555946.29

14020294843

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	209272.69	406708.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	250.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	250.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	209272.69	406958.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	240038.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	118222.33
25. SUBTOTAL (add Line 23 and Line 24)...	358260.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	209272.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	148987.68

**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 116
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Tamara J Allen			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
A. Mailing Address 807 W 21 Rd			Transaction ID : A13D12B9EDDC24397BF3		
City Phillips	State NE	Zip Code 68865-4131	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Occupation registered nurse			
Name of Employer self employed		Election Cycle-to-Date 250.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) Mary Joy Anderson			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
B. Mailing Address 1339 N 138th St			Transaction ID : A982E3AB2843C45F6BB2		
City Omaha	State NE	Zip Code 68154-5101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Occupation Homemaker			
Name of Employer Homemaker		Election Cycle-to-Date 250.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) Gary J Anthone MD			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
C. Mailing Address 8111 Dodge Street Suite 220			Transaction ID : A152E642C19AA425EBA0		
City Omaha	State NE	Zip Code 68114-4117	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Occupation SURGEON			
Name of Employer METHODIST PHYSICIANS CLINIC		Election Cycle-to-Date 1000.00			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

14020294845

**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 6 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Peter L Ax			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
A. Mailing Address 6151 E Caballo Dr			Transaction ID : A71086458734A4C0B882		
City Paradise Valley	State AZ	Zip Code 85253-2279	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Phoenix Capital Management		Occupation Venture Capital			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00			

Full Name (Last, First, Middle Initial) Raette M Bahe			Date of Receipt MM / DD / YYYY 03 / 21 / 2014		
B. Mailing Address 3431 S Hope Ct			Transaction ID : A8DAB6681C33545AB907		
City Lincoln	State NE	Zip Code 68502-5226	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Homemaker		Occupation Homemaker			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00			

Full Name (Last, First, Middle Initial) Barbara Bakhit			Date of Receipt MM / DD / YYYY 01 / 27 / 2014		
C. Mailing Address 3818 Burt St			Transaction ID : ACA694A4F8737493C8EB		
City Omaha	State NE	Zip Code 68131-1819	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer AB's 66		Occupation Owner			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00			

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	

14020294846

**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 7 OF 116		
	<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

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NAME OF COMMITTEE (in Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
J Keith Basham

Mailing Address 119 S 49th Avenue

City Omaha State NE Zip Code 68132-3501

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

Name of Employer Holland Basham Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 02 / 10 / 2014

Transaction ID : **A1295B9D571CD4A398D8**

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
David Beman

Mailing Address PO Box 989

City Mission State SD Zip Code 57555-0989

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 02 / 19 / 2014

Transaction ID : **A52471D982128482E8BC**

Amount of Each Receipt this Period
 150.00

C. Full Name (Last, First, Middle Initial)
Richard A Berger

Mailing Address 1631 S 186th Cir

City Omaha State NE Zip Code 68130-2737

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

Name of Employer Cosentry Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : **A0513A0E126A544BFA2F**

Amount of Each Receipt this Period
 1000.00

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

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

1400.00

14020294847

**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 8 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Rick N Berkshire			Date of Receipt MM / DD / YYYY 01 / 13 / 2014		
Mailing Address 131 S 75th Street #100			Transaction ID : A4CA38B866D7B4130AB3		
City Omaha	State NE	Zip Code 68124	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00			
Name of Employer Bershire & Burmeister		Occupation Attorney			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) Marc C Blackman			Date of Receipt MM / DD / YYYY 03 / 01 / 2014		
Mailing Address 728 Colorado Ct			Transaction ID : AF40BD111A1A04D4AA36		
City Naperville	State IL	Zip Code 60565-5360	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 500.00			
Name of Employer Gold Eagle Co		Occupation Executive			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) Greg J. Boulay			Date of Receipt MM / DD / YYYY 01 / 23 / 2014		
Mailing Address 15905 Lamp Cir			Transaction ID : A2E1C8DAF94984FAD9B2		
City Omaha	State NE	Zip Code 68118-2051	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1500.00			
Name of Employer PELLA WINDOW AND DOORS		Occupation President			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

14020294848

**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 9 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Dana Bradford			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
A. Mailing Address 706 S 94th Ave			Transaction ID : AF2DF66998BD84475967		
City Omaha	State NE	Zip Code 68114-5028	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Waitt Company		Occupation CEO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00			

Full Name (Last, First, Middle Initial) Danielle M Bradford			Date of Receipt MM / DD / YYYY 03 / 31 / 2014		
B. Mailing Address 706 S 94th Ave			Transaction ID : A7933F31286314A30B69		
City Omaha	State NE	Zip Code 68114-5028	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C					
Name of Employer self employed		Occupation RETAIL			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			

Full Name (Last, First, Middle Initial) Jeffrey S Briggs			Date of Receipt MM / DD / YYYY 01 / 24 / 2014		
C. Mailing Address 426 Fairacres Rd			Transaction ID : A0B3F3922E2164173B7F		
City Omaha	State NE	Zip Code 68132-2710	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C					
Name of Employer GPRE		Occupation COO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00			

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

14020294849

**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 10 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Robin E Clark

Mailing Address 1835 N 53rd St

City Omaha State NE Zip Code 68104-4949

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

Name of Employer Kutak Rock Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : A3AB048A5611B407C924

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Gregg A Classen

Mailing Address 5201 N 196th St

City Elkhorn State NE Zip Code 68022-5240

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

Name of Employer Self Occupation Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 MM / DD / YYYY
 03 / 04 / 2014

Transaction ID : AD33A2AA1874E4861948

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Joseph Marion Cox

Mailing Address 2805 Milton Ave

City Dallas State TX Zip Code 75205-1522

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

Name of Employer Bracewell & Giuliani Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 01 / 28 / 2014

Transaction ID : A189267E0F8E040E4B94

Amount of Each Receipt this Period
 250.00

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

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

1250.00

14020294050

**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 11 OF 116	
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Michael S Degan

Mailing Address 2626 N 161st St

City Omaha	State NE	Zip Code 68116-2087
---------------	-------------	------------------------

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

Name of Employer Husch Blackwell	Occupation Attorney
-------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014

Transaction ID : **A5B672A0808F449E49EE**

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Gregory R Dietrich

Mailing Address 1426 S 177th St

City Omaha	State NE	Zip Code 68130-2606
---------------	-------------	------------------------

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

Name of Employer Kutak Rock	Occupation Attorney
--------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Transaction ID : **AE9919552C7CF48FD924**

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Dale Dixon

Mailing Address 656 N 57th Street

City Omaha	State NE	Zip Code 68132-2032
---------------	-------------	------------------------

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

Name of Employer Kutak Rock	Occupation Attorney
--------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **AA1F4A1A79F8C4D43A9C**

Amount of Each Receipt this Period
250.00

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

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

600.00

14020294851

**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 12 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Joyce A Dixon		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 7420 N 124th St		Transaction ID : A69A01390D8A0487ABE0
City Omaha	State NE	Zip Code 68142-1678
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Kutak Rock	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Mary C Dobleman		Date of Receipt MM / DD / YYYY 01 / 30 / 2014
Mailing Address 15826 California St		Transaction ID : A0B69EDCF6ABB41BDB1D
City Omaha	State NE	Zip Code 68118-2230
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00	
Name of Employer Homemaker	Occupation Homemaker	In-kind: Food expense for fundraiser
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2086.00	

Full Name (Last, First, Middle Initial) Mary C Dobleman		Date of Receipt MM / DD / YYYY 01 / 03 / 2014
Mailing Address 15826 California St		Transaction ID : AE48E5E2EB8B747F9A69
City Omaha	State NE	Zip Code 68118-2230
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 586.00	
Name of Employer Homemaker	Occupation Homemaker	In-kind: Food expense for fundraiser
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1686.00	

SUBTOTAL of Receipts This Page (optional).....	1236.00
TOTAL This Period (last page this line number only).....	

14020294852

**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 13 OF 116		
	<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

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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Mary C Dobleman

Mailing Address 15826 California St

City Omaha State NE Zip Code 68118-2230

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 MM / DD / YYYY
 03 / 04 / 2014

Transaction ID : A88B651776727457B89F

Amount of Each Receipt this Period
 414.00

B. Full Name (Last, First, Middle Initial)
James B Dobler

Mailing Address 3922 S 31st Street Cir

City Lincoln State NE Zip Code 68502-5912

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

Name of Employer self employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : AEEA04830055B4BB692F

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Kevin J Dostal

Mailing Address 4830 S 106th Cir

City Omaha State NE Zip Code 68127-1905

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

Name of Employer Locher Pavelka Law Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2250.00

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : A1102DF4EA95A441E868

Amount of Each Receipt this Period
 250.00

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

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

914.00

14020294853

**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 14 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Fritz Duda

Mailing Address 5950 Berkshire Lane

City Dallas State TX Zip Code 75225-5846

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

Name of Employer self employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 MM / DD / YYYY
 02 / 24 / 2014

Transaction ID : **A1B763C3BDAA0423FA81**

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Daniel A Dudley

Mailing Address 5516 N 163rd St

City Omaha State NE Zip Code 68116-3744

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

Name of Employer ODonnell Ficenec Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 01 / 10 / 2014

Transaction ID : **A8FA35727EFC34DA2885**

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mark F Duren

Mailing Address 11725 N 172nd Cir

City Bennington State NE Zip Code 68007-5739

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

Name of Employer Lutz & Company Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
 MM / DD / YYYY
 02 / 28 / 2014

Transaction ID : **A504E79455BB74EEDA66**

Amount of Each Receipt this Period
 500.00

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

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

3250.00

14020294854

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

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

FOR LINE NUMBER: PAGE 15 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Nicholas L Eastland

Mailing Address 1420 N 127th Cir

City Omaha State NE Zip Code 68154-3608

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : A35D1FD7228984F42B01

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
James A. Edney

Mailing Address 12930 Burt St

City Omaha State NE Zip Code 68154-4020

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

Name of Employer Physician Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
 MM / DD / YYYY
 01 / 06 / 2014

Transaction ID : A7B81A32A57674BD6B00

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Bernadette M Esposito

Mailing Address 13006 Seward St

City Omaha State NE Zip Code 68154-1087

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 450.00

Date of Receipt
 MM / DD / YYYY
 03 / 04 / 2014

Transaction ID : AE849581797064659927

Amount of Each Receipt this Period
 100.00

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

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

650.00

14020294855

**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 16 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Raymond J Fehringer

Mailing Address 121 N 251st St
1650 Farnam St.

City Waterloo State NE Zip Code 68069-4836

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

Name of Employer Kutak Rock Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : **A6D45D162579F4E7093A**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Raymond J Fehringer

Mailing Address 121 N 251st St
1650 Farnam St.

City Waterloo State NE Zip Code 68069-4836

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

Name of Employer Kutak Rock Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 MM / DD / YYYY
 02 / 24 / 2014

Transaction ID : **A15118E516B7441A4BF0**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Donna R Finocchiaro

Mailing Address 9910 Broadmoor Rd

City Omaha State NE Zip Code 68114-4927

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 MM / DD / YYYY
 03 / 06 / 2014

Transaction ID : **AB90B3E4E0F3543B2BEB**

Amount of Each Receipt this Period
100.00

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

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

700.00

700.00

14020294856

**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 17 OF 116	
	<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
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
William H Fleming

Mailing Address 17850 S Reflection Ave

City Bennington	State NE	Zip Code 68007-5727
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Physician
-----------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2014

Transaction ID : **A96E88A1906B64AEBB8D**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lance M Fritz

Mailing Address 8532 Hickory St

City Omaha	State NE	Zip Code 68124-1375
---------------	-------------	------------------------

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

Name of Employer Union Pacific	Occupation PRESIDENT & COO
-----------------------------------	-------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2014

Transaction ID : **AF9B86E0D993F4332803**

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
John A Gale

Mailing Address 925 S 51st St

City Lincoln	State NE	Zip Code 68510-3824
-----------------	-------------	------------------------

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

Name of Employer STATE OF NEBRARSKA	Occupation Secretary of State
--	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014

Transaction ID : **A1A397145ADD64E66B5F**

Amount of Each Receipt this Period
250.00

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

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

3000.00

14020294857

**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 18 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
John A Gale

Mailing Address **925 S 51st St**

City **Lincoln** State **NE** Zip Code **68510-3824**

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

Name of Employer **STATE OF NEBRASKA** Occupation **Secretary of State**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A1C3190A943A24BEFBA4**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Randell S Gleason

Mailing Address **15380 W Abbott Rd**

City **Cairo** State **NE** Zip Code **68824-9484**

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

Name of Employer **Self** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **AF47F537B4E884D3E966**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Carmen B Gottschalk

Mailing Address **15671 California St**

City **Omaha** State **NE** Zip Code **68118-2227**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **AB1F0F162D6FC41C3BAE**

Amount of Each Receipt this Period
2600.00

Reattribution from spouse
[MEMO ITEM]

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

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

750.00

14020294858

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 19 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) John E Gottschalk		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 15671 California St		Transaction ID : A743FE3D16F17490AB8B
City Omaha	State NE	Zip Code 68118-2227
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) John E Gottschalk		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 15671 California St		Transaction ID : AD4CF4200B0CE4E52B19
City Omaha	State NE	Zip Code 68118-2227
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00	
Name of Employer Retired	Occupation Retired	Reattribution to spouse
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) Bo Gratton		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 9995 I Street		Transaction ID : AA6365995F0A149CC96C
City Omaha	State NE	Zip Code 68127-1107
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Gratton Warehouse Co	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	7200.00
TOTAL This Period (last page this line number only).....	

14020294859

**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 20 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (in Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Daniel W Griess		Date of Receipt MM / DD / YYYY 01 / 29 / 2014
Mailing Address 744 W 16th St		Transaction ID : A8951C5030CF440EB96E
City	State Zip Code Alliance NE 69301-2214	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Box Butte General Hospital	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Loren D Griess		Date of Receipt MM / DD / YYYY 03 / 30 / 2014
Mailing Address 32120 Road Y		Transaction ID : A99A3E461D36C475499B
City	State Zip Code Sutton NE 68979-2732	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self employed	Occupation Livestock Production	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Patrick B. Griffin		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 5623 Jones St		Transaction ID : A92CC18DDBB2C4B9391B
City	State Zip Code Omaha NE 68106-1232	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Kutak Rock	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2300.00	

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

14020294860

**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 21 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Patrick B. Griffin		Date of Receipt MM / DD / YYYY 01 / 29 / 2014
Mailing Address 5623 Jones St		Transaction ID : A7496452E1E944FAB95A
City Omaha	State NE	Zip Code 68106-1232
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Kutak Rock	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) James R Gustafson		Date of Receipt MM / DD / YYYY 03 / 04 / 2014
Mailing Address 3328 N 133rd Cir		Transaction ID : A6D5EAF9C85D641F38E3
City Omaha	State NE	Zip Code 68164-2495
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer QUALITY BRANDS OF OMAHA	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Bryan G Handlos		Date of Receipt MM / DD / YYYY 02 / 28 / 2014
Mailing Address 504 Waldruh Dr		Transaction ID : A6CBA743280854636BE8
City Bellevue	State NE	Zip Code 68005-2724
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Kutak Rock LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

14020294861

**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 22 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
John R Hanson

Mailing Address **6226 E Cedar Hills Pl**

City **Kearney** State **NE** Zip Code **68845-1696**

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

Name of Employer **Self** Occupation **Developer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
01 / 08 / 2014

Transaction ID : **A65DAE3D9CF16487DB31**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David A Hecker

Mailing Address **1502 Jones St Apt 501**

City **Omaha** State **NE** Zip Code **68102-3150**

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

Name of Employer **Kiewit Corp** Occupation **Group General Counsel**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 MM / DD / YYYY
03 / 26 / 2014

Transaction ID : **A48B9D8C6822D4032A1D**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Patricia W Heffron

Mailing Address **112 S 89th St**

City **Omaha** State **NE** Zip Code **68114-4026**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **755.00**

Date of Receipt
 MM / DD / YYYY
03 / 07 / 2014

Transaction ID : **A09A8139A8E2E4B3CBE4**

Amount of Each Receipt this Period
155.00

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

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

655.00

14020294862

**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 23 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Patricia W Heffron		Date of Receipt MM / DD / YYYY 02 / 05 / 2014
Mailing Address 112 S 89th St		Transaction ID : AD0A6BB3831CC42C8963
City Omaha	State NE	Zip Code 68114-4026
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) Buck L Heim		Date of Receipt MM / DD / YYYY 03 / 01 / 2014
Mailing Address 103 S 173rd Ave		Transaction ID : A57781841A9BD45A7872
City Omaha	State NE	Zip Code 68118-3030
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Kutak Rock	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) John M Hemmer		Date of Receipt MM / DD / YYYY 02 / 25 / 2014
Mailing Address 3014 Puritan Ave		Transaction ID : A8434BD4D528240F5A13
City Lincoln	State NE	Zip Code 68502-4228
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

14020294863

**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 24 OF 116
	<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 <input type="checkbox"/> 15	

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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Curtis L Hofer

Mailing Address 3645 Hidden Acres Ln

City Fort Calhoun State NE Zip Code 68023-5033

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

Name of Employer JASPERSTONE PARTNERS Occupation GENERAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 MM / DD / YYYY
 01 / 10 / 2014

Transaction ID : **ABBBB2994CD8849D5BC0**

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Linda M Hofer

Mailing Address 3645 Hidden Acres Ln

City Fort Calhoun State NE Zip Code 68023-5033

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

Name of Employer JASPERSTONE PARTNERS Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 MM / DD / YYYY
 01 / 10 / 2014

Transaction ID : **A0EA5385DDDF54BF3A64**

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Robert P Horgan

Mailing Address 13415 Eagle Run Dr

City Omaha State NE Zip Code 68164-2479

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

Name of Employer Horgan Development Company Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1200.00

Date of Receipt
 MM / DD / YYYY
 03 / 11 / 2014

Transaction ID : **ADE09817EF6F140B5AE3**

Amount of Each Receipt this Period
 1000.00

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

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

6200.00

14020294864

**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 25 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Thomas W Hoy

Mailing Address 326 S 123rd St

City	State	Zip Code
Omaha	NE	68154-2251

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

Name of Employer	Occupation
EGS	Sr. VP Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : **A23EA44AAD02E4F53B66**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kort A Igel

Mailing Address 17801 Blondo St

City	State	Zip Code
Omaha	NE	68116-2706

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

Name of Employer	Occupation
Igel Orthodontics	Orthodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
 03 / 13 / 2014

Transaction ID : **ACEC4F7FC093945438B9**

Amount of Each Receipt this Period
5400.00

C. Full Name (Last, First, Middle Initial)
Kort A Igel

Mailing Address 17801 Blondo St

City	State	Zip Code
Omaha	NE	68116-2706

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

Name of Employer	Occupation
Igel Orthodontics	Orthodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 MM / DD / YYYY
 03 / 13 / 2014

Transaction ID : **A97CF36202475486492B**

Amount of Each Receipt this Period
200.00

Redesignation from Primary

[MEMO ITEM]

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

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

5500.00

14020294865

**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 26 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Kort A Igel

Mailing Address 17801 Blondo St

City Omaha	State NE	Zip Code 68116-2706
---------------	-------------	------------------------

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

Name of Employer Igel Orthodontics	Occupation Orthodontist
---------------------------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2014

Transaction ID : **A3A773EE141B6464085F**

Amount of Each Receipt this Period
-200.00

Redesignation to General

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Kort A Igel

Mailing Address 17801 Blondo St

City Omaha	State NE	Zip Code 68116-2706
---------------	-------------	------------------------

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

Name of Employer Igel Orthodontics	Occupation Orthodontist
---------------------------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2014

Transaction ID : **AF45BF8E9F1834618A2F**

Amount of Each Receipt this Period
-5200.00

Reattribution to spouse

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Marie T Igel

Mailing Address 17801 Blondo St

City Omaha	State NE	Zip Code 68116-2706
---------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2014

Transaction ID : **A26EB805E69C04522863**

Amount of Each Receipt this Period
2600.00

Redesignation from Primary

[MEMO ITEM]

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

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

0.00

14020294866

**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 27 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Marie T Igel

Mailing Address 17801 Blondo St

City Omaha State NE Zip Code 68116-2706

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 MM / DD / YYYY
 03 / 13 / 2014

Transaction ID : **A876C598CEC044A69A2B**

Amount of Each Receipt this Period
 -2600.00

Redesignation to General

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Marie T Igel

Mailing Address 17801 Blondo St

City Omaha State NE Zip Code 68116-2706

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 MM / DD / YYYY
 03 / 13 / 2014

Transaction ID : **A235B6951F1754380819**

Amount of Each Receipt this Period
 5200.00

Reattribution from spouse

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Victor J Johns

Mailing Address 1820 1st Ave

City Nebraska City State NE Zip Code 68410-2210

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

Name of Employer Bremar Agency, Inc Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 285.00

Date of Receipt
 MM / DD / YYYY
 03 / 15 / 2014

Transaction ID : **A41EE1A15B4C64A8FA5A**

Amount of Each Receipt this Period
 185.00

In-kind: Goods for fundraiser

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

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

185.00

14020294867

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

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

FOR LINE NUMBER: PAGE 28 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Constance A Jones

Mailing Address 10830 W 127th Ter

City Overland Park State KS Zip Code 66213-3422

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : **A341CC5BC2CE8488EBD5**

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
David K Karnes

Mailing Address 9639 Oak Cir

City Omaha State NE Zip Code 68124-2767

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

Name of Employer Information Requested Occupation Information Requested
 Kutak Rock Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 18 / 2014

Transaction ID : **A0261245641A742949D8**

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Joseph E Kean

Mailing Address 6631 E Shore Dr

City Lincoln State NE Zip Code 68516-3960

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

Name of Employer Information Requested Occupation Information Requested
 Self Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : **A0EC99E88E42E4909ACF**

Amount of Each Receipt this Period
 100.00

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

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

1350.00

14020294868

**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 29 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Joseph E Kean		Date of Receipt MM / DD / YYYY 02 / 25 / 2014
Mailing Address 6631 E Shore Dr		Transaction ID : AE44C8673E59F49D6827
City Lincoln	State NE	Zip Code 68516-3960
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Real Estate Broker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00	

Full Name (Last, First, Middle Initial) Joseph E Kean		Date of Receipt MM / DD / YYYY 01 / 30 / 2014
Mailing Address 6631 E Shore Dr		Transaction ID : AD69B494DB46646A6945
City Lincoln	State NE	Zip Code 68516-3960
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Real Estate Broker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) J Patrick Keenan		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 2901 W Leota St		Transaction ID : ADCC67BC026BB48FBBA3
City North Platte	State NE	Zip Code 69101-6383
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer CANTEEN HOSPITALITY	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

14020294869

**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 30 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Paul R Kenney

Mailing Address 10950 Elm Rd

City **Kearney** State **NE** Zip Code **68845-0676**

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

Name of Employer **ETHANOL FARM** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
03 / 03 / 2014

Transaction ID : **A8671BF2E350A41D0A8F**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph L. Kizer

Mailing Address 513 S 88th St

City **Omaha** State **NE** Zip Code **68114-4221**

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

Name of Employer **Resource Insurance Consultants** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 MM / DD / YYYY
03 / 17 / 2014

Transaction ID : **AD71A207BE4C047A9A39**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joseph L. Kizer

Mailing Address 513 S 88th St

City **Omaha** State **NE** Zip Code **68114-4221**

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

Name of Employer **Resource Insurance Consultants** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **A4B177837D5744150A64**

Amount of Each Receipt this Period
500.00

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

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

1250.00

14020294870

**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 31 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) T Edward Kizer		Date of Receipt MM / DD / YYYY 03 / 18 / 2014
Mailing Address 3415 N 143rd Cir		Transaction ID : AD43233AAB6DB4791855
City Omaha	State NE	Zip Code 68164-5420
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Central States	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00	

Full Name (Last, First, Middle Initial) William Kizer		Date of Receipt MM / DD / YYYY 03 / 05 / 2014
Mailing Address P.O. Box 34350		Transaction ID : AEE83A82E8B9E4829935
City Omaha	State NE	Zip Code 68134-0350
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Harry A Koch Jr		Date of Receipt MM / DD / YYYY 02 / 19 / 2014
Mailing Address 1302 S 101st St Apt 310		Transaction ID : A38EF11D658F64A61A98
City Omaha	State NE	Zip Code 68124-6013
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

14020294871

**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 32 OF 116		
	<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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Joyce T Kochen

Mailing Address 1230 N 126th St

City Omaha	State NE	Zip Code 68154-1202
---------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : **A687D88071ADB4A07A11**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Carol L Kontor

Mailing Address 444 Riverfront Plz Apt 903

City Omaha	State NE	Zip Code 68102-4245
---------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **655.00**

Date of Receipt
 MM / DD / YYYY
 03 / 17 / 2014

Transaction ID : **A65D9B00B9F7343D0B82**

Amount of Each Receipt this Period
155.00

C. Full Name (Last, First, Middle Initial)
Elwin M Larson

Mailing Address 1443 N 133rd St

City Omaha	State NE	Zip Code 68154-5289
---------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : **AB218A914AAD84FD19CB**

Amount of Each Receipt this Period
500.00

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

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

755.00

14020294872

**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 33 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Christine Latham

Mailing Address 9238 Garland Street

City Lincoln State NE Zip Code 68505-7900

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

Name of Employer Bershire & Bermeister Occupation ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : ACE530B1322D7495C843

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Eric H Lindquist

Mailing Address 204 S 88th St

City Omaha State NE Zip Code 68114-4022

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

Name of Employer Information Requested Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 17 / 2014

Transaction ID : A12E2B4030D2C4D448A4

Amount of Each Receipt this Period
 877.09

In-kind: Goods for fundraiser

C. Full Name (Last, First, Middle Initial)
Mary B Lindsay

Mailing Address 1537 Skylark Dr

City Omaha State NE Zip Code 68144-1758

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 11 / 2014

Transaction ID : A73AB7B64D1124E5F942

Amount of Each Receipt this Period
 250.00

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

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

2127.09

14020294873

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

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

FOR LINE NUMBER: PAGE 34 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
Jane R Machado

A. Mailing Address 13232 Nicholas Cir

City State Zip Code
Omaha NE 68154-5134

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

Name of Employer Occupation
First Data Corporation Vice-President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A0CC8315EAE0447FA85F**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
James W Maenner

B. Mailing Address 4411 N 134th St

City State Zip Code
Omaha NE 68164-5088

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

Name of Employer Occupation
CB RICHARD ELLIS/MEGA Mega Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **AFB4849D1578545079E7**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
Kurt M Matis

C. Mailing Address 13814 Fowler Ave

City State Zip Code
Omaha NE 68164-6108

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

Name of Employer Occupation
Financial Transmission Network President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014

Transaction ID : **A5E9DE47BFC9C48FB9EF**

Amount of Each Receipt this Period
250.00

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

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

450.00

14020294874

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

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

FOR LINE NUMBER: PAGE 35 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Theodore McClymont Sr.

Mailing Address 3400 s. 91st Street

City Lincoln State NE Zip Code 68520-1427

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

Name of Employer Self Occupation RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 02 / 05 / 2014

Transaction ID : AA902821D9E854E9D8C9

Amount of Each Receipt this Period
 1000.00

Election Cycle-to-Date
 1000.00

B. Full Name (Last, First, Middle Initial)
Allison S McLeay

Mailing Address 16201 Jaynes St

City Omaha State NE Zip Code 68116-3760

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

Name of Employer Midwest Pulmonary Occupation Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 21 / 2014

Transaction ID : AFDD3BE030E1243A3BFF

Amount of Each Receipt this Period
 600.00

Election Cycle-to-Date
 600.00

C. Full Name (Last, First, Middle Initial)
Molly McLeay

Mailing Address 4008 Lively Ln

City Dallas State TX Zip Code 75220-1872

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

Name of Employer Kushman/Wakefield Comm Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 18 / 2014

Transaction ID : A4AB9F49C2A994D5ABB5

Amount of Each Receipt this Period
 500.00

Election Cycle-to-Date
 1500.00

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

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

2100.00

14020294875

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

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

FOR LINE NUMBER: PAGE 36 OF 116
(check only one)

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

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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Peter D Mcleay

Mailing Address 672 N 63rd St

City Omaha State NE Zip Code 68132-1815

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

Name of Employer Heartland Cardiology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2255.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Transaction ID : AD35D132FE6DA425399D

Amount of Each Receipt this Period
255.00

B. Full Name (Last, First, Middle Initial)
PATRICIA MCPHEETERS

Mailing Address GOTHENBURG

City Gothenburg State NE Zip Code 69138

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

Name of Employer Self Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : AD33E9D23F7FF4F2CAFF

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Barbara G Miller

Mailing Address 506 N Elmwood Rd

City Omaha State NE Zip Code 68132-2605

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

Name of Employer Consolidated Water Systems Occupation CO-OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : A22CC0B843C704F95BE1

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1255.00

14020294876

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

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

FOR LINE NUMBER: PAGE 37 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
John R Mimick

Mailing Address 15672 Farnam St

City Omaha State NE Zip Code 68118-4040

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

Name of Employer PRECO INC. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
02 / 19 / 2014

Transaction ID : AD15AB2A92A9B4B18B9A

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Elizabeth A Moberg

Mailing Address 16716 Jones Cir

City Omaha State NE Zip Code 68118-2711

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 13 / 2014

Transaction ID : AFF20A78D0B5546A5AFD

Amount of Each Receipt this Period
155.00

Amount of Each Receipt this Period
155.00

C. Full Name (Last, First, Middle Initial)
Roger W Mock

Mailing Address 8031 Cooper Ave

City Lincoln State NE Zip Code 68506-4757

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

Name of Employer American Public Energy Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : AED2290E1C5F845CDBD7

Amount of Each Receipt this Period
100.00

Amount of Each Receipt this Period
100.00

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

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

505.00

14020294877

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

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

FOR LINE NUMBER: PAGE 38 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Kenneth Leroy Morrison

Mailing Address 21 Village Dr

City Hastings State NE Zip Code 68901-2436

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

Name of Employer INTEGRATED AQUACULTURE INT. LL Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 11 / 2014

Transaction ID : **AC83485FBFA4641AD918**

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Jill L Morrissey

Mailing Address 3333 N 140th St

City Omaha State NE Zip Code 68164-5403

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 05 / 2014

Transaction ID : **A9F559898F2864CB9B49**

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Hugh P Morton

Mailing Address 11844 N 173rd Cir

City Bennington State NE Zip Code 68007-5703

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 29 / 2014

Transaction ID : **A4EEF1ECDB6CD43F7A2F**

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1750.00

14020294878

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

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

FOR LINE NUMBER: PAGE 39 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Hugh P Morton

Mailing Address 11844 N 173rd Cir

City Bennington State NE Zip Code 68007-5703

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 11 / 2014

Transaction ID : **AEC875B7B4DB74C2EA50**

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 600.00

B. Full Name (Last, First, Middle Initial)
Hugh P Morton

Mailing Address 11844 N 173rd Cir

City Bennington State NE Zip Code 68007-5703

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 31 / 2014

Transaction ID : **AA07FCEAC730E4C23A72**

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 950.00

C. Full Name (Last, First, Middle Initial)
Matthew S Moyer

Mailing Address 686 N 164th St

City Omaha State NE Zip Code 68118-2504

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

Name of Employer Enterprise Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 11 / 2014

Transaction ID : **A628E0E29E1BE4662BC0**

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 1000.00

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

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

1100.00

14020294879

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

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

FOR LINE NUMBER: PAGE 40 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Melynda K Moyer

Mailing Address 803 L St

City Aurora State NE Zip Code 68818-1942

FEC ID number of contributing federal political committee.

Name of Employer Information Requested Occupation school psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A89C7E325692A450287D

Amount of Each Receipt this Period

Reattribution from spouse

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Sam L Moyer

Mailing Address 803 L St

City Aurora State NE Zip Code 68818-1942

FEC ID number of contributing federal political committee.

Name of Employer HERITAGE BANK Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A18AEB3F408304366807

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Sam L Moyer

Mailing Address 803 L St

City Aurora State NE Zip Code 68818-1942

FEC ID number of contributing federal political committee.

Name of Employer HERITAGE BANK Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : ACEF9CCB7CA6C47B3BD1

Amount of Each Receipt this Period

Reattribution to spouse

[MEMO ITEM]

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

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

14020294880

**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 41 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Michael G. Mullin		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 9739 Brentwood Rd		Transaction ID : ACA6FFFE74B4A415BBA1
City Omaha	State NE	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Kutak Rock	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) B. Allan M Murow		Date of Receipt MM / DD / YYYY 03 / 03 / 2014
Mailing Address 12911 Lafayette Ave		Transaction ID : A9CA4C5FDE94A4B56A92
City Omaha	State NE	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2600.00
Name of Employer N & M Brokerage Services LLC	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. Craig L Nelson		Date of Receipt MM / DD / YYYY 03 / 29 / 2014
Mailing Address 809 S 251st St		Transaction ID : A0C82599F4B6B4590824
City Waterloo	State NE	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer Sirius Computer Solutions	Occupation Executive Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional)	3850.00
TOTAL This Period (last page this line number only)	

14020294881

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

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

FOR LINE NUMBER: PAGE 42 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Richard P Nelson

Mailing Address 6924 Old Post Pl

City Lincoln State NE Zip Code 68506-2870

FEC ID number of contributing federal political committee.

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : **A9E9E3EC672A74F5CBDD**

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Janet S Nichting

Mailing Address 9754 Ascot Dr

City Omaha State NE Zip Code 68114-3846

FEC ID number of contributing federal political committee.

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : **A76EEFF317A304FD381B**

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Janet S Nichting

Mailing Address 9754 Ascot Dr

City Omaha State NE Zip Code 68114-3846

FEC ID number of contributing federal political committee.

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : **AA86A4FEFFC6842BFA56**

Amount of Each Receipt this Period

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

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

14020294882

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

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

FOR LINE NUMBER: PAGE 43 OF 116
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Brad J Nielsen

Mailing Address 10279 Washington Dr

City Omaha	State NE	Zip Code 68127-4523
---------------	-------------	------------------------

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

Name of Employer Kutak Rock	Occupation Attorney
--------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **A84B786A528D444A382D**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lois F Norder

Mailing Address 2159 Road 6300

City Bruning	State NE	Zip Code 68322-4010
-----------------	-------------	------------------------

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

Name of Employer Norder Supply Inc	Occupation Owner
---------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **AAAD60622F75246F7B95**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John M Northrop

Mailing Address 2430 N Elm Ave

City Hastings	State NE	Zip Code 68901-7336
------------------	-------------	------------------------

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

Name of Employer NORTHROP ENTERPRISES, LLC	Occupation President
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **AE37D8594E624417CABD**

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... **975.00**

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

14020294883

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

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

FOR LINE NUMBER: PAGE 44 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Karen O'Dowd

Mailing Address 9390 Western Ave #106

City Omaha State NE Zip Code 68114-6738

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 255.00

Date of Receipt
 MM / DD / YYYY
 03 / 06 / 2014

Transaction ID : A4BCDFE18B73C48FE935

Amount of Each Receipt this Period
 255.00

B. Full Name (Last, First, Middle Initial)
Edward Thomas Oglesby

Mailing Address 58 Aberdeen Dr

City Little Rock State AR Zip Code 72223-9101

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

Name of Employer Kutak Rock LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 MM / DD / YYYY
 01 / 20 / 2014

Transaction ID : A325A206674A44ACDA73

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dan O'Neill

Mailing Address 615 Sequoia Ct

City North Platte State NE Zip Code 69101-4760

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

Name of Employer KSAP, INC. Occupation Convenience Store Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 MM / DD / YYYY
 01 / 16 / 2014

Transaction ID : AAE240547B42340D5A2E

Amount of Each Receipt this Period
 2600.00

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

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

3355.00

14020294884

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

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

FOR LINE NUMBER: PAGE 45 OF 116
(check only one)

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

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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Daniel O'Neill

Mailing Address 9615 Oak Circle

City Omaha	State NE	Zip Code 68124-2767
---------------	-------------	------------------------

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

Name of Employer First National Bank, Inc	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 07 / 2014

Transaction ID : A35F7AD13BF5B4536B03

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
robert L. ortman

Mailing Address 5116 Underwood Ave

City Omaha	State NE	Zip Code 68132-2238
---------------	-------------	------------------------

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

Name of Employer DRI TITLE & ESCROW	Occupation CHIEF FINANCIAL OFFICER
--	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 01 / 21 / 2014

Transaction ID : AD8FA22C3DE524D4FB44

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Arun A Patil

Mailing Address 6105 Chicago St

City Omaha	State NE	Zip Code 68132-1921
---------------	-------------	------------------------

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

Name of Employer UNMC	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 06 / 2014

Transaction ID : AD87B8D44BF14447CB6A

Amount of Each Receipt this Period
 200.00

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

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

1450.00

14020294885

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Patricia S Peterson

Mailing Address **1111 Ridgewood Ave**

City **Omaha** State **NE** Zip Code **68124-1312**

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

Name of Employer **Kutak Rock** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **A811BC29A38EA45B2A11**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Margene R Phares

Mailing Address **608 Sequoia Ct**

City **North Platte** State **NE** Zip Code **69101-4760**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **A1E153A0A39BF4A2691B**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Daneen A Pieper

Mailing Address **3425 N 143rd Cir**

City **Omaha** State **NE** Zip Code **68164-5420**

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

Name of Employer **Creighton Prep High School** Occupation **Fundraiser**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 MM / DD / YYYY
03 / 05 / 2014

Transaction ID : **A5EF32991B47248AC8E8**

Amount of Each Receipt this Period
50.00

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

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

1050.00

14020294886

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

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

FOR LINE NUMBER: PAGE 47 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Christina M Piperis

Mailing Address 1310 N 136th Ave

City Omaha State NE Zip Code 68154-5266

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

Name of Employer Occupation
Piperis Interventional Pain Care Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 02 / 12 / 2014

Transaction ID : **A25BC278D330F45AEAB7**

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mitchell L Pirnie

Mailing Address 18510 Shadow Ridge Dr

City Omaha State NE Zip Code 68130-2716

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 21 / 2014

Transaction ID : **A13C9D33460BE4AF583E**

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
David E. Potter

Mailing Address 16511 Mason St

City Omaha State NE Zip Code 68118-2748

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

Name of Employer Occupation
Arctic Glacier Co. Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 MM / DD / YYYY
 03 / 27 / 2014

Transaction ID : **A63B691CD9AA54482899**

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1300.00

14020294887

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

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

FOR LINE NUMBER: PAGE 48 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Leo Rasmussen

Mailing Address 12719 Cedar St.

City Leawood State KS Zip Code 66209-3414

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /
 Transaction ID : **AB72EB6846B234DB7881**

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Patrick G Regan

Mailing Address 3126 N 158th Plaza Cir

City Omaha State NE Zip Code 68116-8246

FEC ID number of contributing federal political committee.

Name of Employer THE REGAN GROUP Occupation PRINCIPAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /
 Transaction ID : **A6D5517650B764F23A2E**

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Jeffrey M. Rensch

Mailing Address 674 N 63rd St

City Omaha State NE Zip Code 68132-1815

FEC ID number of contributing federal political committee.

Name of Employer NP Dodge Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /
 Transaction ID : **A7C1BF83569CE493D841**

Amount of Each Receipt this Period

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

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

14020294888

**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 49 OF 116	
	<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
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Michael J Robino		Date of Receipt MM / DD / YYYY 03 / 20 / 2014
Mailing Address 9719 Frederick St		Transaction ID : A1CD2D5B198E743EE84E
City Omaha	State NE	Zip Code 68124-2734
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer WELLS FARGO	Occupation Investment Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Mary F Root		Date of Receipt MM / DD / YYYY 02 / 10 / 2014
Mailing Address 8909 Douglas Ct		Transaction ID : A13B56FE02E894C0BBD5
City Omaha	State NE	Zip Code 68114-4075
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Mary F Root		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 8909 Douglas Ct		Transaction ID : A9720922066084D61B1C
City Omaha	State NE	Zip Code 68114-4075
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

14020294889

**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 50 OF 116	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Michael E Root

Mailing Address 9961 Essex Dr

City Omaha	State NE	Zip Code 68114-3873
---------------	-------------	------------------------

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

Name of Employer Innovative SB, Inc.	Occupation Sales
---	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A9E136B25397E434C833**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William E Roskens

Mailing Address 4359 Far Hills Ln

City Omaha	State NE	Zip Code 68152-5182
---------------	-------------	------------------------

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

Name of Employer FIRST CARE MANAGEMENT GROUP	Occupation President
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A7553D0791C8C4757812**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Phil M Ruden

Mailing Address 1705 N 130th Avenue Cir

City Omaha	State NE	Zip Code 68154-3627
---------------	-------------	------------------------

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

Name of Employer BOYS TOWN	Occupation Chief Investment Officer
-------------------------------	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **A25529830877F456D90E**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

850.00

14020294890

**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 51 OF 116	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Lori L Samuelson		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 32240 Road A		Transaction ID : A2767BF022EBD4599AB1	
City Trumbull	State NE	Zip Code 68980-9727	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date 250.00		
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Richard Dean Samuelson		Date of Receipt MM / DD / YYYY 03 / 27 / 2014	
Mailing Address 460 Road 323		Transaction ID : A61A1B3359C7742E1A3E	
City Trumbull	State NE	Zip Code 68980-9736	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date 650.00		
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Richard Dean Samuelson		Date of Receipt MM / DD / YYYY 03 / 27 / 2014	
Mailing Address 460 Road 323		Transaction ID : AABD3A99CF66E45B5AEB	
City Trumbull	State NE	Zip Code 68980-9736	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date 650.00		
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

14020294891

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

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

FOR LINE NUMBER: PAGE 52 OF 116
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Jeffrey E Sauvageau

Mailing Address 1306 S 78th Ave

City Omaha	State NE	Zip Code 68124-1407
---------------	-------------	------------------------

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

Name of Employer Sirius Computer Solutions	Occupation Executive
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **A3428E92F2C6A4BB0B45**
Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
Scott A Schmidt

Mailing Address 725 N 163rd St

City Omaha	State NE	Zip Code 68118-2507
---------------	-------------	------------------------

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

Name of Employer Kiewit Corp	Occupation VP Finance
---------------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : **AD16DC800086642DF9B0**
Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
Mary A Schuele

Mailing Address 2008 S 183rd Cir

City Omaha	State NE	Zip Code 68130-2744
---------------	-------------	------------------------

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

Name of Employer Waitt Company	Occupation INVESTMENTS
-----------------------------------	---------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 04 / 2014**
Transaction ID : **AEAE6DB33CB9A4279BDE**
Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **2250.00**

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

14020294892

**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 53 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Anthony D Scioli

Mailing Address 409 S 93rd St

City Omaha State NE Zip Code 68114-5065

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

Name of Employer Kutak Rock Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 505.00

Date of Receipt
 MM / DD / YYYY
 02 / 25 / 2014

Transaction ID : A19F20FC0EDEB4666831

Amount of Each Receipt this Period
 255.00

B. Full Name (Last, First, Middle Initial)
Walter Scott Jr

Mailing Address 8725 Rainwood Rd

City Omaha State NE Zip Code 68122-2309

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

Name of Employer PETER KIEWIT SONS INC. Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 MM / DD / YYYY
 03 / 21 / 2014

Transaction ID : AF4E52569077243498DE

Amount of Each Receipt this Period
 5200.00

C. Full Name (Last, First, Middle Initial)
Walter Scott Jr

Mailing Address 8725 Rainwood Rd

City Omaha State NE Zip Code 68122-2309

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

Name of Employer PETER KIEWIT SONS INC. Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 MM / DD / YYYY
 03 / 21 / 2014

Transaction ID : AA248F29E6F084723979

Amount of Each Receipt this Period
 2600.00

Redesignation from Primary

[MEMO ITEM]

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

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

5455.00

14020294893

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

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

FOR LINE NUMBER: PAGE 54 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Walter Scott Jr

Mailing Address 8725 Rainwood Rd

City Omaha State NE Zip Code 68122-2309

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

Name of Employer Occupation
PETER KIEWIT SONS INC. Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2014

Transaction ID : **AB77A44C3E4144002B8A**

Amount of Each Receipt this Period
-2600.00

Redesignation to General

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Suzanne M Shehan

Mailing Address 5303 Nicholas St

City Omaha State NE Zip Code 68132-2100

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

Name of Employer Occupation
Kutak Rock Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A5939A34D76FB40E5AD0**

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
WILLIAM S SINGER

Mailing Address 10410 N 84th Street

City Omaha State NE Zip Code 68122-4006

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

Name of Employer Occupation
ORTHOWEST, PC SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **A6000C0030CF143EF90F**

Amount of Each Receipt this Period
500.00

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

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

700.00

14020294894

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

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

FOR LINE NUMBER: PAGE 55 OF 116
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Stuart Smith

Mailing Address 3666 Beecham Lane
Unit A

City Cincinnati State OH Zip Code 45208-1805

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

Name of Employer self employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 12 / 2014

Transaction ID : AD1CC48F1830740279CC

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Leonard M Sommer

Mailing Address 104 N 54th St

City Omaha State NE Zip Code 68132-2811

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

Name of Employer Hancock Dana Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
01 / 06 / 2014

Transaction ID : A38D201EAFE1D4017A3C

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Neil A Stanley

Mailing Address 12755 Hamilton St

City Omaha State NE Zip Code 68154-3604

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

Name of Employer Bank Performance Strategies Occupation BANKING CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 29 / 2014

Transaction ID : A406BE510A40A480A942

Amount of Each Receipt this Period
400.00

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

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

1650.00

14020294895

**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 56 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Darlene A Starman		Date of Receipt MM / DD / YYYY 01 / 06 / 2014	
Mailing Address 1030 Rockhurst Dr		Transaction ID : A839D970CE94C485490B	
City Lincoln	State NE	Zip Code 68510-4116	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer Woods Bros. Realty	Occupation Realtor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="300.00"/>		
		Amount of Each Receipt this Period <input type="text" value="100.00"/>	

Full Name (Last, First, Middle Initial) B. Darlene A Starman		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 1030 Rockhurst Dr		Transaction ID : A7816191873664E948B9	
City Lincoln	State NE	Zip Code 68510-4116	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer Woods Bros. Realty	Occupation Realtor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="400.00"/>		
		Amount of Each Receipt this Period <input type="text" value="100.00"/>	

Full Name (Last, First, Middle Initial) C. Steven F Stratman		Date of Receipt MM / DD / YYYY 03 / 21 / 2014	
Mailing Address 7446 N 124th St		Transaction ID : AD101B3B91C664089891	
City Omaha	State NE	Zip Code 68142-1678	
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	
Name of Employer Retired	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="450.00"/>		
		Amount of Each Receipt this Period <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="450.00"/>

14020294896

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

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

FOR LINE NUMBER: PAGE 57 OF 116
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Glen R Stuart

Mailing Address **21 Harvey Ln**

City **Malvern** State **PA** Zip Code **19355-2907**

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

Name of Employer **Morgan Lewis & Bockius** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
01 / 02 / 2014

Transaction ID : **A6F09099636B24B029FC**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kenneth R Svoboda

Mailing Address **7309 Skyhawk Cir**

City **Lincoln** State **NE** Zip Code **68506-4659**

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

Name of Employer **Ray's Lawn & Home Care** Occupation **CO-OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
03 / 31 / 2014

Transaction ID : **ACCE5967805DB48E9B33**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Harish Tella

Mailing Address **17702 Island Cir**

City **Bennington** State **NE** Zip Code **68007-5763**

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

Name of Employer **self employed** Occupation **Programmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
03 / 29 / 2014

Transaction ID : **AD10E724266484C3C949**

Amount of Each Receipt this Period
1000.00

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

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

1750.00

14020294897

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

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

FOR LINE NUMBER: PAGE 58 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Ravindra N Tella

Mailing Address 17702 Island Cir

City Bennington State NE Zip Code 68007-5763

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

Name of Employer Retired Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt
 03 / 31 / 2014

Transaction ID : A7A3DCCBDFFD64C80929

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Daniel J Thayer

Mailing Address 2604 Cottonwood Rd

City Grand Island State NE Zip Code 68801-7546

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

Name of Employer THAYER & THAYER, PC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 225.00

Date of Receipt
 03 / 31 / 2014

Transaction ID : A8BDA2CC5F32A4381AFA

Amount of Each Receipt this Period
 225.00

C. Full Name (Last, First, Middle Initial)
George Thommi

Mailing Address 1301 S 184th Cir

City Omaha State NE Zip Code 68130-2729

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

Name of Employer Midwest Pulmonary Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 03 / 31 / 2014

Transaction ID : A8C2EA086B2C24737B44

Amount of Each Receipt this Period
 1000.00

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

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

3825.00

14020294898

**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 59 OF 116	
	<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
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Brett S Thomsen

Mailing Address 13737 Boyd St

City	State	Zip Code
Omaha	NE	68164-6009

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

Name of Employer	Occupation
Self	DOCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY
03	05	2014

Transaction ID : **A2E0E1014165340E0A42**

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Joel W Vanderveen

Mailing Address 1118 S 80th St

City	State	Zip Code
Omaha	NE	68124-1420

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

Name of Employer	Occupation
KUTAK, ROCK	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY
02	28	2014

Transaction ID : **A21B1718C98084F3299D**

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Joseph D Verdirame

Mailing Address 17505 Island Cir

City	State	Zip Code
Bennington	NE	68007-5731

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

Name of Employer	Occupation
Self	DOCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM	DD	YYYY
03	05	2014

Transaction ID : **A757B9D472BFF45BF9BD**

Amount of Each Receipt this Period

250.00

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

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

750.00

14020294899

**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 60 OF 116	
	<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
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Albert B Washko		Date of Receipt MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1923 N 132nd Avenue Cir		Transaction ID : ABB043162C48E4FD4836
City Omaha	State NE	Zip Code 68154-3899
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Al Washko, LLC	Occupation Health Care Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Albert B Washko		Date of Receipt MM / DD / YYYY 01 / 10 / 2014
Mailing Address 1923 N 132nd Avenue Cir		Transaction ID : A49B6641D18FC4034B95
City Omaha	State NE	Zip Code 68154-3899
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Al Washko, LLC	Occupation Health Care Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Margaret M Welch		Date of Receipt MM / DD / YYYY 03 / 27 / 2014
Mailing Address 303 W Lochland Rd		Transaction ID : AF74D088C65994922B3A
City Hastings	State NE	Zip Code 68901-2427
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 307.24 In-kind: Food expense for fundraiser	
Name of Employer Self	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 907.24	

SUBTOTAL of Receipts This Page (optional).....	1807.24
TOTAL This Period (last page this line number only).....	

14020294900

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

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

FOR LINE NUMBER: PAGE 61 OF 116
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Margaret M Welch

Mailing Address 303 W Lochland Rd

City State Zip Code
Hastings NE 68901-2427

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

Name of Employer Occupation
Self Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
907.24

Date of Receipt
MM / DD / YYYY
03 / 27 / 2014

Transaction ID : **A9FA1251A52EA4295947**

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Thomas F Werner

Mailing Address 2729 Lakewood Dr

City State Zip Code
Grand Island NE 68801-7271

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

Name of Employer Occupation
Self DOCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
249.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **A1B1855B3B7AB43A3ADE**

Amount of Each Receipt this Period
249.00

C. Full Name (Last, First, Middle Initial)
Jeff J Wilmes

Mailing Address 1040 Summerwood Cir

City State Zip Code
Fremont NE 68025-6419

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

Name of Employer Occupation
KAUP SEED & FERTILIZER GENERAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Transaction ID : **ACE107F5995CC44B0A3F**

Amount of Each Receipt this Period
500.00

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

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

1349.00

14020294901

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

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

FOR LINE NUMBER: PAGE 62 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Full Name (Last, First, Middle Initial)
Gary K Witt

Mailing Address 9736 Brentwood Rd

City State Zip Code
Omaha NE 68114-4925

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

Name of Employer Occupation
Lutz & Company CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014

Transaction ID : A1FB9F67B3FFC4D14B4E

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alton S K Wong

Mailing Address 971 Makaiwa St

City State Zip Code
Honolulu HI 96816-5401

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

Name of Employer Occupation
Physician Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : A0F1FAC68BA79419A864

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gary K Wright

Mailing Address 1101 N Lincoln St

City State Zip Code
Lexington NE 68850-1642

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

Name of Employer Occupation
Nebraskaland Tire Co Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2014

Transaction ID : AE41B78A0F717402895C

Amount of Each Receipt this Period
250.00

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

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

1250.00

14020294902

**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 63 OF 116
	<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 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) Dennis R Zimmerman		Date of Receipt MM / DD / YYYY 03 / 06 / 2014
Mailing Address 12935 Izard St		Transaction ID : A9DA2781679944EE88D2
City Omaha	State NE	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer St. Robert Bellarmine Church	Occupation Business Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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

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

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	106653.33

14020294903

**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 64 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 7.38 Transaction ID : BB9222A03E6534692B50
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 3.04 Transaction ID : B2FBD695A53C745FCB78
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 01 / 07 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : BE9BF69BC6D1C43A6970
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	18.37
TOTAL This Period (last page this line number only).....	

14020294904

**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 65 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 01 / 25 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 14.60 Transaction ID : BEE7F8C810F804694A0F
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 14.60 Transaction ID : BBF9A497596DD4E54895
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : BB403D4415D13405CBA7
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	37.15
TOTAL This Period (last page this line number only).....	

14020294905

**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 66 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. American Express

Mailing Address P.O. Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 18 / 2014

Amount of Each Disbursement this Period
7.38

Transaction ID : BC1EE124B702D414DBE0

Full Name (Last, First, Middle Initial)
B. American Express

Mailing Address P.O. Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 24 / 2014

Amount of Each Disbursement this Period
14.60

Transaction ID : B92677BA56B20446FAF2

Full Name (Last, First, Middle Initial)
C. American Express

Mailing Address P.O. Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2014

Amount of Each Disbursement this Period
19.09

Transaction ID : BF35F516A47D245F197E

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

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

41.07

14020294906

**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 67 OF 116		
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		MM / DD / YYYY 03 / 03 / 2014
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period
		7.52
Candidate Name		Transaction ID : B38182FE1BDD64E67978
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		MM / DD / YYYY 03 / 03 / 2014
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period
		3.33
Candidate Name		Transaction ID : BBC9C039B5ED248B08D7
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		MM / DD / YYYY 03 / 04 / 2014
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees		Amount of Each Disbursement this Period
		0.87
Candidate Name		Transaction ID : B0AC60942BE734781BDE
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11.72
TOTAL This Period (last page this line number only).....	

14020294907

**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 68 OF 116	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 14.60 Transaction ID : B1EABB94CD3B54484A6B
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 7.95 Transaction ID : B2D329297522B415D833
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 3.04 Transaction ID : B5BF917A678DA4A02A01
City Ft Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional)	25.59
TOTAL This Period (last page this line number only)	

14020294908

**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 69 OF 116
	<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="7.38"/>
Office Sought:	Disbursement For: 2014	Transaction ID : B556E5A30B68143C4816
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="3.04"/>
Office Sought:	Disbursement For: 2014	Transaction ID : B512319D441C64158BA4
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement
Mailing Address P.O. Box 360001		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ft Lauderdale	FL	33336-0001
Purpose of Disbursement Credit Card Fees	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="3.04"/>
Office Sought:	Disbursement For: 2014	Transaction ID : BD88F3F64E9C04031A0D
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="13.46"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

14020294909

**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 70 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Aristotle

Full Name (Last, First, Middle Initial)
Aristotle

Mailing Address 205 Pennsylvania Ave.

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement 6 mo software lease expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2014

Amount of Each Disbursement this Period: 6000.00

Transaction ID : B9E86F7FA43134159A2D

Category/Type

B. Bakers

Full Name (Last, First, Middle Initial)
Bakers

Mailing Address 12025 West Center Road

City Omaha State NE Zip Code 68144-3953

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2014

Amount of Each Disbursement this Period: 196.00

Transaction ID : B936F0821F83B4633BD4

[MEMO ITEM]

Category/Type

c. Bakers

Full Name (Last, First, Middle Initial)
Bakers

Mailing Address 12025 West Center Road

City Omaha State NE Zip Code 68144-3953

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 16 / 2014

Amount of Each Disbursement this Period: 245.00

Transaction ID : B46498EB4BADE4C51862

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 6000.00

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

14020294910

**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 71 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Bakers		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 12025 West Center Road		Amount of Each Disbursement this Period 147.00
City Omaha	State NE	
Zip Code 68144-3953	Purpose of Disbursement Postage	Transaction ID : B0ED103FBDC0E4E4B812
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bakers		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 12025 West Center Road		Amount of Each Disbursement this Period 9.00
City Omaha	State NE	
Zip Code 68144-3953	Purpose of Disbursement office supplies	Transaction ID : B0247A5EDFD3540EA9E4
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Bakers		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 12025 West Center Road		Amount of Each Disbursement this Period 160.40
City Omaha	State NE	
Zip Code 68144-3953	Purpose of Disbursement Food for Fundraiser	Transaction ID : BD333DB96E7284C38932
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020294911

**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 72 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Catholic Charities		Date of Disbursement
Mailing Address 3300 N 60th Street		MM / DD / YYYY 03 / 05 / 2014
City Omaha	State NE	Zip Code 68104-3402
Purpose of Disbursement Purchase of table at Irish Fest	Category/ Type	Amount of Each Disbursement this Period 300.00
Candidate Name		Transaction ID : B18C563D95CB24CA3A49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Cox Business		Date of Disbursement
Mailing Address PO Box 2742		MM / DD / YYYY 01 / 08 / 2014
City Omaha	State NE	Zip Code 68103-2742
Purpose of Disbursement Telephone & internet expense	Category/ Type	Amount of Each Disbursement this Period 458.92
Candidate Name		Transaction ID : B5FBF2EFE0675486E8E5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cox Business		Date of Disbursement
Mailing Address PO Box 2742		MM / DD / YYYY 01 / 23 / 2014
City Omaha	State NE	Zip Code 68103-2742
Purpose of Disbursement Telephone & internet expense	Category/ Type	Amount of Each Disbursement this Period 465.62
Candidate Name		Transaction ID : B1717CAE7A92B4F6B9F3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	924.54
TOTAL This Period (last page this line number only).....	

14020294912

**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 73 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Cox Business		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address PO Box 2742		Amount of Each Disbursement this Period 465.58 Transaction ID : BA043124623A84E14B16
City Omaha	State NE	
Zip Code 68103-2742	Purpose of Disbursement Telephone & internet expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Cox Business		Date of Disbursement MM / DD / YYYY 03 / 26 / 2014
Mailing Address PO Box 2742		Amount of Each Disbursement this Period 447.40 Transaction ID : B1B20F374F9FF4B03926
City Omaha	State NE	
Zip Code 68103-2742	Purpose of Disbursement Telephone & internet expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Douglas County Republican Party		Date of Disbursement MM / DD / YYYY 01 / 16 / 2014
Mailing Address		Amount of Each Disbursement this Period 1000.00 Transaction ID : B2D3D3A7C515B4547AA2
City Omaha	State NE	
Zip Code 68145	Purpose of Disbursement Table sponsor-Elephant Remembers Dinner	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1912.98
TOTAL This Period (last page this line number only).....	

14020294913

**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 74 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Duryea Strategic Marketing LLC		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address PO Box 540251		Amount of Each Disbursement this Period 2655.65 Transaction ID : B73852B7ED808460CA22
City Omaha	State NE	
Zip Code 68154-0251	Purpose of Disbursement Email Append	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Expedia Travel		Date of Disbursement MM / DD / YYYY 02 / 23 / 2014
Mailing Address 333 108th Ave. NE		Amount of Each Disbursement this Period 579.50 Transaction ID : B7C638A62F2324F9EA9D [MEMO ITEM]
City Bellevue	State WA	
Zip Code 98004-5703	Purpose of Disbursement Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Fairfield Inn Suites		Date of Disbursement MM / DD / YYYY 01 / 27 / 2014
Mailing Address 319 W South River Road		Amount of Each Disbursement this Period 223.92 Transaction ID : B83856B77BA664467846
City North Platte	State NE	
Zip Code 69101-6988	Purpose of Disbursement Hotel while traveling	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2879.57
TOTAL This Period (last page this line number only).....	

14020294914

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. First Dakota Indemnity Co

Mailing Address PO Box 860065

City Minneapolis State MN Zip Code 55486-0065

Purpose of Disbursement
 Workers Comp insurance

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 02 / 25 / 2014

Amount of Each Disbursement this Period
 277.00

Transaction ID : B37FBE6C6143840BD91C

Category/Type

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

Mailing Address 1600 Amphitheater

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
 Monthly fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 03 / 03 / 2014

Amount of Each Disbursement this Period
 38.52

Transaction ID : BA85DBF91B195452EB3C

Category/Type

Full Name (Last, First, Middle Initial)
c. Google

Mailing Address 1600 Amphitheater

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
 Monthly fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 02 / 03 / 2014

Amount of Each Disbursement this Period
 62.50

Transaction ID : B6F96341BCBC74C58AD4

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 315.52

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

14020294915

**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 76 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 1600 Amphitheater		Amount of Each Disbursement this Period 62.50
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Monthly fee		Transaction ID : B172C13C84BB94319B78 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 1600 Amphitheater		Amount of Each Disbursement this Period 62.50
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement Monthly service fee		Transaction ID : B7B01ECB474574AB4ABB [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hampton Inn		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 301 W Highway 26		Amount of Each Disbursement this Period 463.92
City Scottsbluff	State NE Zip Code 69361-0611	
Purpose of Disbursement Hotel while traveling		Transaction ID : B599DCC30974F4CCB8D5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	463.92
TOTAL This Period (last page this line number only)	

14020294916

**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 77 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Hy-Vee		Date of Disbursement
Mailing Address 749 N 132nd St.		MM / DD / YYYY 03 / 18 / 2014
City Omaha	State NE	Zip Code 68154-4022
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 49.00
Candidate Name	Category/ Type	Transaction ID : B5C6EAED32B5E46E3901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement
Mailing Address P.O. Box 37941		MM / DD / YYYY 02 / 10 / 2014
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Payroll tax deposit		Amount of Each Disbursement this Period 2103.00
Candidate Name	Category/ Type	Transaction ID : BE3FB9754408147D1978
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Date of Disbursement
Mailing Address P.O. Box 37941		MM / DD / YYYY 03 / 17 / 2014
City Hartford	State CT	Zip Code 06176-7941
Purpose of Disbursement Payroll tax deposit		Amount of Each Disbursement this Period 2207.41
Candidate Name	Category/ Type	Transaction ID : B42DDEB46832A4A71848
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4310.41
TOTAL This Period (last page this line number only).....	

14020294917

**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 78 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Kinko's		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 173.61
City Omaha	State NE	Zip Code 68154-2518
Purpose of Disbursement Invitations & replies		Transaction ID : BF3FC1874D8F045DE829
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kinko's		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 49.54
City Omaha	State NE	Zip Code 68154-2518
Purpose of Disbursement Invitations & replies		Transaction ID : B0F4A0DF35AF24CB4A6A
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kinko's		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 7.48
City Omaha	State NE	Zip Code 68154-2518
Purpose of Disbursement Calendar		Transaction ID : B92F0AA3D97DD42D3A9D
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020294918

**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 79 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Kinko's		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 69.22
City Omaha	State NE	
Purpose of Disbursement Invitations & replies		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kinko's		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 49.54
City Omaha	State NE	
Purpose of Disbursement Invitations & replies		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Kinko's		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 401 N 114th Street		Amount of Each Disbursement this Period 85.09
City Omaha	State NE	
Purpose of Disbursement Invitations & replies		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020294919

**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 80 OF 116	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.:

Full Name (Last, First, Middle Initial) A. Lancaster County Republican Party		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 305.00
City Lincoln	State NE	
Purpose of Disbursement	Category/Type	Transaction ID : BBF5A1C21C354482093E
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Modern Image (Grant Petruzzelli)		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address 588 Archwood Avenue		Amount of Each Disbursement this Period 500.00
City Brea	State CA	
Purpose of Disbursement Consulting-social media & web design	Category/Type	Transaction ID : B149EC5B1EB024DE68A9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Modern Image (Grant Petruzzelli)		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 588 Archwood Avenue		Amount of Each Disbursement this Period 781.84
City Brea	State CA	
Purpose of Disbursement Travel costs reimbursement	Category/Type	Transaction ID : BC43520A990E54CE7BA1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1586.84
TOTAL This Period (last page this line number only).....	

14020294920

**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 81 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Modern Image (Grant Petruzzelli)

Mailing Address 588 Archwood Avenue

City Brea State CA Zip Code 92821-2707

Purpose of Disbursement
Consulting-social media & web design

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 01 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : B5E4AB762F5214999942

Category/Type

Full Name (Last, First, Middle Initial)
B. Modern Image (Grant Petruzzelli)

Mailing Address 588 Archwood Avenue

City Brea State CA Zip Code 92821-2707

Purpose of Disbursement
Consulting-social media & web design

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 07 / 2014

Amount of Each Disbursement this Period
500.00

Transaction ID : B6C0C33F38C7F470AA73

Category/Type

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

Mailing Address PO Box 3600

City Omaha State NE Zip Code 68103-0600

Purpose of Disbursement
Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 28 / 2014

Amount of Each Disbursement this Period
973.14

Transaction ID : B6E2519E5A62B480C8B7

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1973.14

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

14020294921

**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 82 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

A. MUD

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3600

City Omaha State NE Zip Code 68103-0600

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 01 / 2014

Amount of Each Disbursement this Period: 660.94

Transaction ID : B08ABF56924C243C69C1

B. MUD

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3600

City Omaha State NE Zip Code 68103-0600

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2014

Amount of Each Disbursement this Period: 572.07

Transaction ID : B1A89D80E66CB48C6932

c. Nebraska Department of Revenue

Full Name (Last, First, Middle Initial)

Mailing Address 301 Centennial Mall S

City Lincoln State NE Zip Code 68508-2529

Purpose of Disbursement NE withholding taxes- 3rd & 4th quarter

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 06 / 2014

Amount of Each Disbursement this Period: 1117.18

Transaction ID : B8425331E46044B909F6

SUBTOTAL of Disbursements This Page (optional)..... 2350.19

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

14020294922

**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"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Nebraska Workforce Development

Mailing Address 105 E Norfolk Ave
Suite 100

City Lincoln State NE Zip Code

Purpose of Disbursement
NE unemployment tax-3rd quarter

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
01 / 19 / 2014

Amount of Each Disbursement this Period

112.31

Transaction ID : B284574164FBD482B98F

Category/
Type

Full Name (Last, First, Middle Initial)

B. Nebraska Workforce Development

Mailing Address 105 E Norfolk Ave
Suite 100

City Lincoln State NE Zip Code

Purpose of Disbursement
NE unemployment tax-4th quarter

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
01 / 19 / 2014

Amount of Each Disbursement this Period

268.80

Transaction ID : B4A70A234CE634BEA9A8

Category/
Type

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement
office supplies

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
02 / 27 / 2014

Amount of Each Disbursement this Period

22.46

Transaction ID : BCCF1A4347B71453FB2C

[MEMO ITEM]

Category/
Type

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

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

381.11

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14020294923

**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 84 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement Postage and supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 04 / 2014

Amount of Each Disbursement this Period: 115.10

Transaction ID : B17A58D0ABBBB400DBA4

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Office Depot

Mailing Address 2809 S 125th Ave

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 10.77

Transaction ID : B80B3FA039B7B4D42B4F

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
c. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 20 / 2014

Amount of Each Disbursement this Period: 17.10

Transaction ID : B3D4050E70B9D4522832

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

14020294924

**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 85 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement							
A. Office Depot		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td>14</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	01	14	2014
M M	D D	Y Y Y Y							
01	14	2014							
Mailing Address 2809 S 125th Ave.		Amount of Each Disbursement this Period							
City	State	Zip Code	<table border="1"> <tr> <td>54.74</td> </tr> </table>	54.74					
54.74									
Omaha	NE	68144-3872	Transaction ID : BAD1E48A7D4274DF6A65						
Purpose of Disbursement office supplies		Category/ Type	[MEMO ITEM]						
Candidate Name									
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

Full Name (Last, First, Middle Initial)		Date of Disbursement							
B. Office Depot		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td>08</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	01	08	2014
M M	D D	Y Y Y Y							
01	08	2014							
Mailing Address 2809 S 125th Ave.		Amount of Each Disbursement this Period							
City	State	Zip Code	<table border="1"> <tr> <td>38.07</td> </tr> </table>	38.07					
38.07									
Omaha	NE	68144-3872	Transaction ID : B68C7FAD645854B07A8D						
Purpose of Disbursement office supplies, stationary		Category/ Type	[MEMO ITEM]						
Candidate Name									
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

Full Name (Last, First, Middle Initial)		Date of Disbursement							
C. Office Depot		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td>14</td> <td>2014</td> </tr> </table>		M M	D D	Y Y Y Y	03	14	2014
M M	D D	Y Y Y Y							
03	14	2014							
Mailing Address 2809 S 125th Ave.		Amount of Each Disbursement this Period							
City	State	Zip Code	<table border="1"> <tr> <td>77.51</td> </tr> </table>	77.51					
77.51									
Omaha	NE	68144-3872	Transaction ID : B1C4F7D7B80D749109D0						
Purpose of Disbursement office supplies		Category/ Type	[MEMO ITEM]						
Candidate Name									
Office Sought:	Disbursement For: 2014								
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

14020294925

**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"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 28 / 2014

Amount of Each Disbursement this Period
2.13

Transaction ID : B87A9C54BC5E440FA8B4

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Office Depot

Mailing Address 2809 S 125th Ave

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement Envelopes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 11 / 2014

Amount of Each Disbursement this Period
26.51

Transaction ID : BB7B253B71EE04F5DB3D

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
c. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 28 / 2014

Amount of Each Disbursement this Period
201.89

Transaction ID : B978662E5156E44B38DE

[MEMO ITEM]

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

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

0.00

14020294926

**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 87 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Office Depot

Mailing Address 2809 S 125th Ave.

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 28 / 2014

Amount of Each Disbursement this Period: 71.68

Transaction ID : B733F44FF554848B9BD9

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Office Depot

Mailing Address 2809 S 125th Ave

City Omaha State NE Zip Code 68144-3872

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2014

Amount of Each Disbursement this Period: 114.95

Transaction ID : BDDF4F3F9F7364832A4C

[MEMO ITEM]

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

Mailing Address PO Box 3995

City Omaha State NE Zip Code 68103-0995

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 01 / 2014

Amount of Each Disbursement this Period: 749.68

Transaction ID : B765C089DF5384D95866

SUBTOTAL of Disbursements This Page (optional)..... 749.68

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

14020294927

**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 88 OF 116		
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. OPPD

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3995

City Omaha State NE Zip Code 68103-0995

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2014

Amount of Each Disbursement this Period: 225.46

Transaction ID : BACF8922FA7B5468FAD3

Category/Type

B. Patriot Signage, Inc

Full Name (Last, First, Middle Initial)

Mailing Address 1001 Second Ave

City Dayton State KY Zip Code 41074-1291

Purpose of Disbursement Political signs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 14 / 2014

Amount of Each Disbursement this Period: 7148.00

Transaction ID : BEFFAA3ACC1754E74B12

Category/Type

C. Petersen Printing

Full Name (Last, First, Middle Initial)

Mailing Address 4121 S 87th St.

City Omaha State NE Zip Code 68127-1601

Purpose of Disbursement Invitations

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 10 / 2014

Amount of Each Disbursement this Period: 40.66

Transaction ID : BDDCBAC50A59A4C63858

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 7414.12

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

14020294928

**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 89 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Petersen Printing		Date of Disbursement
Mailing Address 4121 S 87th St.		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Omaha	State NE	Zip Code 68127-1601
Purpose of Disbursement Printing Expense	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="203.30"/>
Candidate Name	Category/ Type	Transaction ID : B6C1ACD1339724B7CA2E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Petersen Printing		Date of Disbursement
Mailing Address 4121 S 87th St.		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Omaha	State NE	Zip Code 68127-1601
Purpose of Disbursement Printing Expense	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="267.50"/>
Candidate Name	Category/ Type	Transaction ID : B9E6AD77664AF453FB5C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Petersen Printing		Date of Disbursement
Mailing Address 4121 S 87th St.		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City Omaha	State NE	Zip Code 68127-1601
Purpose of Disbursement Printing Expense	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="459.97"/>
Candidate Name	Category/ Type	Transaction ID : B6288F8484B6143E482E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="930.77"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

14020294929

**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"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Petersen Printing

Mailing Address 4121 S 87th St.

City Omaha State NE Zip Code 68127-1601

Purpose of Disbursement Printing Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 19 / 2014

Amount of Each Disbursement this Period: 196.88

Transaction ID : B2A0DB793C835401CBC2

Category/Type

Full Name (Last, First, Middle Initial)
B. Phil Young Company

Mailing Address Suite 800

City Lincoln State NE Zip Code 68508

Purpose of Disbursement consulting fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 02 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : BE0DD932EF28C42ECB60

Category/Type

Full Name (Last, First, Middle Initial)
c. Phil Young Company

Mailing Address Suite 800

City Lincoln State NE Zip Code 68508

Purpose of Disbursement Consulting fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 17 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : BB5F070D0C8E44748ABF

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5196.88

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

14020294930

**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 91 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Quality Press		Date of Disbursement
Mailing Address 3500 N 20th St.		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Lincoln	State NE	Zip Code 68521-1334
Purpose of Disbursement Printing Expense	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2087.53"/>
Candidate Name	Category/Type	Transaction ID : B0B667720E4004301AD4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rising Tide Media Group, LLC		Date of Disbursement
Mailing Address 226 S Fayette		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22314-3520
Purpose of Disbursement Commercial Shoot	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="3295.00"/>
Candidate Name	Category/Type	Transaction ID : B6DE4EDFB5FB743329E9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sam's Club		Date of Disbursement
Mailing Address 4900 N 27th St.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Lincoln	State NE	Zip Code 68521-1194
Purpose of Disbursement Gas while traveling	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="34.54"/>
Candidate Name	Category/Type	Transaction ID : B40081D3ABA024EDBA2C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="5417.07"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

14020294931

**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 92 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Sam's Club

Full Name (Last, First, Middle Initial)

Mailing Address 13130 L Street

City Omaha State NE Zip Code 68137-1866

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 28.24

Transaction ID : BB9F28BB5E48E4B4090E

[MEMO ITEM]

B. Sam's Club

Full Name (Last, First, Middle Initial)

Mailing Address 13130 L Street

City Omaha State NE Zip Code 68137-1866

Purpose of Disbursement Food/beverage reimbursement for event

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 97.68

Transaction ID : B7D93F55AAFE6422CB16

[MEMO ITEM]

c. Secretary of State

Full Name (Last, First, Middle Initial)

Mailing Address 1445 K Street #2300

City Lincoln State NE Zip Code 68508-2731

Purpose of Disbursement Election filing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 25 / 2014

Amount of Each Disbursement this Period: 1740.00

Transaction ID : BB9BF6F7DEE45478F8D0

SUBTOTAL of Disbursements This Page (optional)..... 1740.00

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

14020294932

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Strategic Media Services, Inc.

Mailing Address 1911 North Ft. Myer Drive
Suite 400

City Arlington State VA Zip Code 22209-1617

Purpose of Disbursement
Television media buy

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 Y Y
02 / 03 / 2014

Amount of Each Disbursement this Period

100377.50

Transaction ID : BD40545470C5B48809A9

Category/
Type

Full Name (Last, First, Middle Initial)

B. Think Video

Mailing Address

City Omaha State NE Zip Code 68114

Purpose of Disbursement
Promotional video

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 Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

450.00

Transaction ID : BC62D910B2DDA44848B2

Category/
Type

Full Name (Last, First, Middle Initial)

C. Transfirst

Mailing Address Suite 100
12202 Airport Way

City Broomfield State CO Zip Code 80021-2596

Purpose of Disbursement
Credit Card Fees

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 Y Y
01 / 10 / 2014

Amount of Each Disbursement this Period

470.73

Transaction ID : B149F5787C51C4AA296A

Category/
Type

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

101298.23

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

14020294933

**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 94 OF 116

<input checked="" type="checkbox"/> 17	<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 type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Transfirst		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address Suite 100 12202 Airport Way		Amount of Each Disbursement this Period 605.91 Transaction ID : BBC4942B9DE064E3AA6D
City Broomfield	State CO	
Zip Code 80021-2596	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Transfirst		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address Suite 100 12202 Airport Way		Amount of Each Disbursement this Period 96.53 Transaction ID : BA361CF7BBA8F45A8BFC
City Broomfield	State CO	
Zip Code 80021-2596	Purpose of Disbursement Credit Card Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement MM / DD / YYYY 01 / 27 / 2014
Mailing Address 139 S 144th St.		Amount of Each Disbursement this Period 1401.46 Transaction ID : B90D4B5770F47465CBBA
City Omaha	State NE	
Zip Code 68154-5300	Purpose of Disbursement postage for mailing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2103.90
TOTAL This Period (last page this line number only).....	

14020294934

**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 95 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement
Mailing Address 139 S 144th St.		MM / DD / YYYY 02 / 25 / 2014
City Omaha	State NE	Zip Code 68154-5300
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 147.00
Candidate Name	Category/ Type	Transaction ID : B0EB391ECF8AC4EC3B10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement
Mailing Address 139 S 144th St.		MM / DD / YYYY 02 / 25 / 2014
City Omaha	State NE	Zip Code 68154-5300
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 54.95
Candidate Name	Category/ Type	Transaction ID : B1DDBF84F017F4996B4F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. V & R Joint Venture		Date of Disbursement
Mailing Address 11205 John Galt Boulevard		MM / DD / YYYY 01 / 02 / 2014
City Omaha	State NE	Zip Code 68137-2319
Purpose of Disbursement Rent		Amount of Each Disbursement this Period 2475.00
Candidate Name	Category/ Type	Transaction ID : B4B7B50669BB44FDEBBF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2475.00
TOTAL This Period (last page this line number only).....	

14020294935

**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 96 OF 116
	<input checked="" type="checkbox"/> 17 <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 type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. V & R Joint Venture

Mailing Address 11205 John Galt Boulevard

City Omaha State NE Zip Code 68137-2319

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 02 / 2014

Amount of Each Disbursement this Period: 448.65

Transaction ID: B938CCF87C6C348F99E0

Category/Type

Full Name (Last, First, Middle Initial)
B. V & R Joint Venture

Mailing Address 11205 John Galt Boulevard

City Omaha State NE Zip Code 68137-2319

Purpose of Disbursement Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 10 / 2014

Amount of Each Disbursement this Period: 2475.00

Transaction ID: BBC7BEFAC95E642128B1

Category/Type

Full Name (Last, First, Middle Initial)
c. V & R Joint Venture

Mailing Address 11205 John Galt Boulevard

City Omaha State NE Zip Code 68137-2319

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 20 / 2014

Amount of Each Disbursement this Period: 656.65

Transaction ID: B8285B56B1F0549CA9EC

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3580.30

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

14020294936

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. V & R Joint Venture

Mailing Address 11205 John Galt Boulevard

City Omaha State NE Zip Code 68137-2319

Purpose of Disbursement
Rent

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY	02 / 10 / 2014
----------------	----------------

Amount of Each Disbursement this Period

2475.00

Transaction ID : B75618942C4A142DE820

Category/
Type

B. V & R Joint Venture

Mailing Address 11205 John Galt Boulevard

City Omaha State NE Zip Code 68137-2319

Purpose of Disbursement
Rent

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY	03 / 06 / 2014
----------------	----------------

Amount of Each Disbursement this Period

2475.00

Transaction ID : BDBADAEE363F24C07AAC

Category/
Type

C. Verizon

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement
Monthly iPad fee

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY	01 / 10 / 2014
----------------	----------------

Amount of Each Disbursement this Period

30.00

Transaction ID : B5EB5E6BA70374E1192D

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4980.00

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14020294937

**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 98 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Verizon

Full Name (Last, First, Middle Initial)

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement Telephone expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 28 / 2014

Amount of Each Disbursement this Period: 143.54

Transaction ID : B7CDFEB5D878C444C840

Category/Type

B. Verizon

Full Name (Last, First, Middle Initial)

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement Monthly iPad fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 30.00

Transaction ID : BF3F1997D3D9442409B4

Category/Type

c. Verizon

Full Name (Last, First, Middle Initial)

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement Telephone expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 132.90

Transaction ID : BAB77943A79E04A5394C

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 306.44

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

14020294938

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement
Monthly iPad fee

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 Y Y
03 / 10 / 2014

Amount of Each Disbursement this Period

30.00

Transaction ID : B1DFD1F2114054BC9A64

Category/ Type

B. Verizon

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement
Telephone expense

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 Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

1.74

Transaction ID : BBF0E9B8591304C17AF7

Category/ Type

C. Verizon

Mailing Address 14811 W Maple Rd

City Omaha State NE Zip Code 68116-5172

Purpose of Disbursement
Cell phone bill

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 Y Y
02 / 26 / 2014

Amount of Each Disbursement this Period

85.62

Transaction ID : B360EBA743FEC4204A89

[MEMO ITEM]

Category/ Type

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

31.74

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

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14020294939

**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 100 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement
Mailing Address 14811 W Maple Rd		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City Omaha	State NE	Zip Code 68116-5172
Purpose of Disbursement Cell phone bill	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="85.62"/>
Candidate Name	Category/Type	Transaction ID : B2287ABA019524875AA0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement
Mailing Address 14811 W Maple Rd		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City Omaha	State NE	Zip Code 68116-5172
Purpose of Disbursement Cell phone bill	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="78.06"/>
Candidate Name	Category/Type	Transaction ID : B29A900386EA24A42AC8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement
Mailing Address 228 South Washington Street Suite B-20		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Alexandria	State VA	Zip Code 22314-5402
Purpose of Disbursement Restaurant charges	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="67.79"/>
Candidate Name	Category/Type	Transaction ID : B292B267CD5714DB4849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="67.79"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

14020294940

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Winfrey & Company

Mailing Address 228 South Washington Street
Suite B-20

City Alexandria State VA Zip Code 22314-5402

Purpose of Disbursement
Qtrly consult fees, DC pkg & cabs, meal at Cafe Mozart

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 Y Y
01 / 10 / 2014

Amount of Each Disbursement this Period

2596.96

Transaction ID : BB35771C739E441E8BDC

Category/
Type

Full Name (Last, First, Middle Initial)

B. Michelle Callison

Mailing Address 3101 Blackhawk Drive

City Bellevue State NE Zip Code 68123-6206

Purpose of Disbursement
Consulting Fees

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 Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : BC27851D41545437DA86

Category/
Type

Full Name (Last, First, Middle Initial)

C. Michelle Callison

Mailing Address 3101 Blackhawk Drive

City Bellevue State NE Zip Code 68123-6206

Purpose of Disbursement
Consulting Fees

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 Y Y
01 / 28 / 2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : B9C826AE117564748B51

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

12596.96

TOTAL This Period (last page this line number only)

14020294941

**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 102 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Michelle Callison		Date of Disbursement
Mailing Address 3101 Blackhawk Drive		MM / DD / YYYY 03 / 06 / 2014
City Bellevue	State NE	Zip Code 68123-6206
Purpose of Disbursement Consulting Fees		Amount of Each Disbursement this Period 1250.00
Candidate Name	Category/Type	Transaction ID : BFA1B959ECF2E4612AAE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Michelle Callison		Date of Disbursement
Mailing Address 3101 Blackhawk Drive		MM / DD / YYYY 03 / 20 / 2014
City Bellevue	State NE	Zip Code 68123-6206
Purpose of Disbursement Reimbursement for expenses-see attached		Amount of Each Disbursement this Period 819.68
Candidate Name	Category/Type	Transaction ID : B38B5B305D6034632916
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Michelle Callison		Date of Disbursement
Mailing Address 3101 Blackhawk Drive		MM / DD / YYYY 03 / 11 / 2014
City Bellevue	State NE	Zip Code 68123-6206
Purpose of Disbursement Reimbursement for expenses-see attached		Amount of Each Disbursement this Period 450.26
Candidate Name	Category/Type	Transaction ID : BC3BBA075444E467FA91
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2519.94
TOTAL This Period (last page this line number only).....	

14020294942

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. Michelle Callison

Mailing Address 3101 Blackhawk Drive

City Bellevue State NE Zip Code 68123-6206

Purpose of Disbursement
reimbursement for office supplies

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 Y Y
01 / 28 / 2014

Amount of Each Disbursement this Period

201.89

Transaction ID : BE8BD297EDDAC45FABBD

Category/
Type

Full Name (Last, First, Middle Initial)

B. Barbara J Clinch

Mailing Address 2605 Arrowhead Rd

City Grand Island State NE Zip Code 68801-7524

Purpose of Disbursement
Food/beverage reimbursement for event

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 Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

260.35

Transaction ID : BA17CA3EBF7D349BB945

Category/
Type

Full Name (Last, First, Middle Initial)

c. Mary C Dobleman

Mailing Address 15826 California St

City Omaha State NE Zip Code 68118-2230

Purpose of Disbursement
In-kind:Food expense for fundraiser

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 Y Y
01 / 30 / 2014

Amount of Each Disbursement this Period

400.00

Transaction ID : B0B69EDCF6ABB41BDB1D

Category/
Type

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

862.24

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

14020294943

**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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Mary C Dobleman		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address 15826 California St		Amount of Each Disbursement this Period 586.00 Transaction ID : BE48E5E2EB8B747F9A69
City Omaha	State NE	
Zip Code 68118-2230	Purpose of Disbursement In-kind: Food expense for fundraiser	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Fischer		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 3015 N 160th Street		Amount of Each Disbursement this Period 164.04 Transaction ID : B0F60F616AF714DA19E7
City Omaha	State NE	
Zip Code 68116-2449	Purpose of Disbursement Payroll \$177.63 less \$13.59 payroll taxes & withholding	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Benjamin J Heinke		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 10225 N 156th St		Amount of Each Disbursement this Period 1329.61 Transaction ID : B186A212D6E8C4FFB845
City Bennington	State NE	
Zip Code 68007-5508	Purpose of Disbursement Salary \$1500 less \$170.39 payroll taxes & withholding	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2079.65
TOTAL This Period (last page this line number only).....	

14020294944

**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 105 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Benjamin J Heinke		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 10225 N 156th St		Amount of Each Disbursement this Period 1329.61 Transaction ID : B4A4102E41EE7490EBB1
City Bennington	State NE Zip Code 68007-5508	
Purpose of Disbursement Salary \$1500 less \$170.39 payroll taxes & withholding		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Benjamin J Heinke		Date of Disbursement MM / DD / YYYY 03 / 01 / 2014
Mailing Address 10225 N 156th St		Amount of Each Disbursement this Period 1329.61 Transaction ID : BCA372F8E0C3F4EBD83E
City Bennington	State NE Zip Code 68007-5508	
Purpose of Disbursement Salary \$1500 less \$170.39 payroll taxes & withholding		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Benjamin J Heinke		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 10225 N 156th St		Amount of Each Disbursement this Period 215.97 Transaction ID : BD94BADBBAA794513B1A
City Bennington	State NE Zip Code 68007-5508	
Purpose of Disbursement Reimbursement for expenses-see attached		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2875.19
TOTAL This Period (last page this line number only).....	

14020294945

**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 106 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Benjamin J Heinke		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 10225 N 156th St		Amount of Each Disbursement this Period 248.58 Transaction ID : BF32557F49CD343CCA3E
City Bennington	State NE Zip Code 68007-5508	
Purpose of Disbursement Reimbursement for expenses-see attached		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Victor J Johns		Date of Disbursement MM / DD / YYYY 03 / 15 / 2014
Mailing Address 1820 1st Ave		Amount of Each Disbursement this Period 185.00 Transaction ID : B41EE1A15B4C64A8FA5A
City Nebraska City	State NE Zip Code 68410-2210	
Purpose of Disbursement In-kind:Goods for fundraiser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Eric H Lindquist		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 204 S 88th St		Amount of Each Disbursement this Period 877.09 Transaction ID : B12E2B4030D2C4D448A4
City Omaha	State NE Zip Code 68114-4022	
Purpose of Disbursement In-kind:Goods for fundraiser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1310.67
TOTAL This Period (last page this line number only).....	

14020294946

**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)

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

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

A. Bartholomew McLeay

Full Name (Last, First, Middle Initial)
Mailing Address 12936 Burt St.

City Omaha State NE Zip Code 68154-4020

Purpose of Disbursement
mileage reimbursement

Candidate Name
Bartholomew McLeay

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 20 / 2014

Amount of Each Disbursement this Period
1096.27

Transaction ID : B854281EEE1DF48378E3

B. Bartholomew McLeay

Full Name (Last, First, Middle Initial)
Mailing Address 12936 Burt St.

City Omaha State NE Zip Code 68154-4020

Purpose of Disbursement
Reimbursement for expenses-see attached

Candidate Name
Bartholomew McLeay

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 21 / 2014

Amount of Each Disbursement this Period
655.00

Transaction ID : BA0B985FAE2B848DEA0B

C. Bartholomew McLeay

Full Name (Last, First, Middle Initial)
Mailing Address 12936 Burt St.

City Omaha State NE Zip Code 68154-4020

Purpose of Disbursement
Schack fundraiser, office supplies

Candidate Name
Bartholomew McLeay

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 14 / 2014

Amount of Each Disbursement this Period
112.88

Transaction ID : BA5A95A48352C424592E

SUBTOTAL of Disbursements This Page (optional)..... 1864.15

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

14020294947

**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 108 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Bartholomew McLeay		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 12936 Burt St.		Amount of Each Disbursement this Period 177.27 Transaction ID : BE603526C630B4304ABA
City Omaha	State NE	
Zip Code 68154-4020	Purpose of Disbursement Expense reimbursement--see following support	Category/ Type
Candidate Name Bartholomew McLeay	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bartholomew McLeay		Date of Disbursement MM / DD / YYYY 02 / 13 / 2014
Mailing Address 12936 Burt St.		Amount of Each Disbursement this Period 1700.69 Transaction ID : B97C687064A7149E09B9
City Omaha	State NE	
Zip Code 68154-4020	Purpose of Disbursement Reimbursement for expenses-see attached	Category/ Type
Candidate Name Bartholomew McLeay	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bartholomew McLeay		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address 12936 Burt St.		Amount of Each Disbursement this Period 842.86 Transaction ID : BE2251DF10C6243F28DD
City Omaha	State NE	
Zip Code 68154-4020	Purpose of Disbursement Mileage reimb, office supplies	Category/ Type
Candidate Name Bartholomew McLeay	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2720.82
TOTAL This Period (last page this line number only).....	

14020294948

**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 109 OF 116			
	<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)
Bart McLeay for U.S. Senate, Inc.

A. Bartholomew McLeay

Full Name (Last, First, Middle Initial)

Mailing Address 12936 Burt St.

City Omaha State NE Zip Code 68154-4020

Purpose of Disbursement
mileage reimbursement

Candidate Name
Bartholomew McLeay

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 13 / 2014

Amount of Each Disbursement this Period
1648.86

Transaction ID : B391DAF15BD6F4E40912

[MEMO ITEM]

B. Patrick Roy

Full Name (Last, First, Middle Initial)

Mailing Address 7730 Vernon Ave

City Omaha State NE Zip Code 68134-2166

Purpose of Disbursement
Salary \$3,000 less payroll taxes & withholding \$739.84

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 02 / 2014

Amount of Each Disbursement this Period
2260.16

Transaction ID : BB75C3D6BB98C446E9CF

C. Patrick Roy

Full Name (Last, First, Middle Initial)

Mailing Address 7730 Vernon Ave

City Omaha State NE Zip Code 68134-2166

Purpose of Disbursement
Cell phone bill reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 20 / 2014

Amount of Each Disbursement this Period
133.20

Transaction ID : B812F9112E2D74AE9B27

SUBTOTAL of Disbursements This Page (optional)..... 2393.36

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

14020294949

**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 110 OF 116	
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Patrick Roy

Mailing Address **7730 Vernon Ave**

City **Omaha** State **NE** Zip Code **68134-2166**

Purpose of Disbursement
Salary \$3,000 less payroll taxes & withholding \$739.84

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 28 / 2014

Amount of Each Disbursement this Period
2260.16

Transaction ID : **B5DFF1CACA3864FA2B1E**

Category/Type

Full Name (Last, First, Middle Initial)
B. Patrick Roy

Mailing Address **7730 Vernon Ave**

City **Omaha** State **NE** Zip Code **68134-2166**

Purpose of Disbursement
Salary \$3,000 less payroll taxes & withholding \$739.84

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 01 / 2014

Amount of Each Disbursement this Period
2260.16

Transaction ID : **B1388A8BD771542AD896**

Category/Type

Full Name (Last, First, Middle Initial)
c. Patrick Roy

Mailing Address **7730 Vernon Ave**

City **Omaha** State **NE** Zip Code **68134-2166**

Purpose of Disbursement
Cell phone bill

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 11 / 2014

Amount of Each Disbursement this Period
133.28

Transaction ID : **B3CD3879A13514BF4BE5**

Category/Type

SUBTOTAL of Disbursements This Page (optional) **4653.60**

TOTAL This Period (last page this line number only)

14020294950

**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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PAGE 111 OF 116

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NAME OF COMMITTEE (In Full)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)
A. Patrick Roy

Mailing Address **7730 Vernon Ave**

City **Omaha** State **NE** Zip Code **68134-2166**

Purpose of Disbursement
Reimbursement for invitations/replys

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 20 / 2014

Amount of Each Disbursement this Period
90.91

Transaction ID : **BE37445B5BC5640949C5**

Category/Type

Full Name (Last, First, Middle Initial)
B. Tyler Seals

Mailing Address **13520 S 31st Street**

City **Bellevue** State **NE** Zip Code **68123-2297**

Purpose of Disbursement
Payroll \$261.00 less \$27.61 payroll taxes & withholding

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
02 / 03 / 2014

Amount of Each Disbursement this Period
233.39

Transaction ID : **B59CCC37340114A2C879**

Category/Type

Full Name (Last, First, Middle Initial)
c. Tyler Seals

Mailing Address **13520 S 31st Street**

City **Bellevue** State **NE** Zip Code **68123-2297**

Purpose of Disbursement
Payroll \$1200.00 less \$234.64 payroll taxes & withholding

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 01 / 2014

Amount of Each Disbursement this Period
965.36

Transaction ID : **B55643E51CC8C4EADA84**

Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1289.66

14020294951

**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 112 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. Tyler Seals		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 13520 S 31st Street		Amount of Each Disbursement this Period 17.10 Transaction ID : BC16EE7B984D44017A78
City Bellevue	State NE	
Zip Code 68123-2297	Purpose of Disbursement reimbursement for office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. John E Spray		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 2201 Harrison Ave		Amount of Each Disbursement this Period 3147.18 Transaction ID : B77B253A286844876867
City Lincoln	State NE	
Zip Code 68502-3931	Purpose of Disbursement Salary \$4,000 less 852.82 payroll taxes & withholding	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. John E Spray		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 2201 Harrison Ave		Amount of Each Disbursement this Period 3147.18 Transaction ID : BC9A794C0BFE6407FA47
City Lincoln	State NE	
Zip Code 68502-3931	Purpose of Disbursement Salary \$4,000 less \$852.82 withholding & taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6311.46
TOTAL This Period (last page this line number only).....	

14020294952

**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 113 OF 116

<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial)

A. John E Spray

Mailing Address 2201 Harrison Ave

City Lincoln State NE Zip Code 68502-3931

Purpose of Disbursement
Payroll \$4000 less \$852.82 payroll taxes & withholding

Candidate Name

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

State: District:

Date of Disbursement

MM 03	DD 01	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

3147.18

Transaction ID : B8398BF62656C4BE9B88

Category/
Type

Full Name (Last, First, Middle Initial)

B. John E Spray

Mailing Address 2201 Harrison Ave

City Lincoln State NE Zip Code 68502-3931

Purpose of Disbursement
Mileage and expense reimbursement

Candidate Name

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

State: District:

Date of Disbursement

MM 03	DD 11	YYYY 2014
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Amount of Each Disbursement this Period

1668.96

Transaction ID : BCADB9193F87940BCBFF

Category/
Type

Full Name (Last, First, Middle Initial)

c. John E Spray

Mailing Address 2201 Harrison Ave

City Lincoln State NE Zip Code 68502-3931

Purpose of Disbursement
reimbursement for office supplies

Candidate Name

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

State: District:

Date of Disbursement

MM 01	DD 28	YYYY 2014
----------	----------	--------------

Amount of Each Disbursement this Period

249.16

Transaction ID : B66A135D7C28A480BA9C

Category/
Type

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

5065.30

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

5065.30

14020294953

**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 114 OF 116
	<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)
Bart McLeay for U.S. Senate, Inc.

Full Name (Last, First, Middle Initial) A. John E Spray		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 2201 Harrison Ave		Amount of Each Disbursement this Period 821.14 Transaction ID : BBD4AF8D1E8DC4D048DC
City Lincoln	State NE Zip Code 68502-3931	
Purpose of Disbursement Reimbursement for expenses-see attached		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Margaret M Welch		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 303 W Lochland Rd		Amount of Each Disbursement this Period 307.24 Transaction ID : BF74D088C65994922B3A
City Hastings	State NE Zip Code 68901-2427	
Purpose of Disbursement In-kind:Food expense for fundraiser		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Joseph Zach		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 4704 S 163rd Street		Amount of Each Disbursement this Period 195.84 Transaction ID : B9DE88644C7494FF49B7
City Omaha	State NE Zip Code 68135-1366	
Purpose of Disbursement Payroll \$195.84 less \$16.22 payroll taxes & withholding		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1324.22
TOTAL This Period (last page this line number only).....	207404.72

14020294954

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)
Bart McLeay for U.S. Senate, Inc.

Transaction ID : CF222F901E0484C8886F

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

[PERSONAL FUNDS]

Election: 2014

Bartholomew McLeay

Primary

Mailing Address
12936 Burt St.

General

Other (specify) ▼

City State ZIP Code
Omaha NE 68154-4020

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: MM/YY / DD/YY / YYYY
07 / 03 / 2013

Date Due: MM/YY / DD/YY / YYYY
None

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)	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)... 50000.00

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.

14020294955

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)

Transaction ID : C70025929EA9E42A091E

Bart McLeay for U.S. Senate, Inc.

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

Bartholomew McLeay

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
12936 Burt St.

City State ZIP Code
Omaha NE 68154-4020

Original Amount of Loan: 2000.00
Cumulative Payment To Date: 0.00
Balance Outstanding at Close of This Period: 2000.00

TERMS

Date Incurred: M 07 / D 01 / Y 2013
Date Due: M M / D D / Y Y Y Y Y Y: None
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)	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)..... ▶ 2000.00
TOTALS This Period (last page in this line only) .. ▶ 52000.00

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

14020294956

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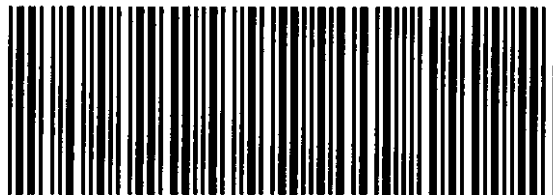
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4/15/14

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SEN PATCH



SEN PATCH

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