

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Kelly PAC

ADDRESS (number and street) ▼

901 N Washington Street

Suite 700

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314-1535

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00493411

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

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)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2014

through

M M M / D D D / Y Y Y Y Y Y
05 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 Theodore V. Koch

Signature of Treasurer

Theodore V. Koch

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
06 12 2014

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Kelly PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 05 / 01 / 2014 To: M M / D D / Y Y Y Y Y 05 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		118411.3
(b) Cash on Hand at Beginning of Reporting Period.....	143854.12	
(c) Total Receipts (from Line 19)	15500	139548.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	159354.12	257959.96
7. Total Disbursements (from Line 31)	40441.81	139047.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	118912.31	118912.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Kelly PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
05 01 2014

To:

M M / D D / Y Y Y Y Y
05 31 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

500

10500

(ii) Unitemized

0

0

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

500

10500

(b) Political Party Committees

0

1048.66

(c) Other Political Committees

(such as PACs).....

15000

128000

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15500

139548.66

12. Transfers From Affiliated/Other

Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5)

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15500

139548.66

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

15500

139548.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	18441.81	68847.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18441.81	68847.65
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000	60000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	7000	10200
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	40441.81	139047.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40441.81	139047.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15500	139548.66
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15500	139548.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	18441.81	68847.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	18441.81	68847.65

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. William O'Neill

Mailing Address 401 L Street SE

City

Washington

State

DC

Zip Code

20003-3438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ogilvy Gov't Relations

Occupation

Principal

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : 875-987-c

Amount of Each Receipt this Period

500

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. AT&T Inc. Federal PAC

Mailing Address 208 S Akard Street
Suite 2701

City State Zip Code
Dallas TX 75202-4206

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000

Date of Receipt

05 / 07 / 2014

Transaction ID : 301-977-c

Amount of Each Receipt this Period

3000

Contribution

Full Name (Last, First, Middle Initial)

B. Building Owners and Managers Assoc. International PAC

Mailing Address 1101 15th Street NW
Suite 800

City State Zip Code
Washington DC 20005-5021

FEC ID number of contributing
federal political committee.

C C00106435

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

05 / 12 / 2014

Transaction ID : 877-992-c

Amount of Each Receipt this Period

1000

Contribution

Full Name (Last, First, Middle Initial)

C. ESOP Association PAC

Mailing Address 1726 M Street NW
Suite 501

City State Zip Code
Washington DC 20036-4522

FEC ID number of contributing
federal political committee.

C C00196089

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500

Date of Receipt

05 / 23 / 2014

Transaction ID : 454-999-c

Amount of Each Receipt this Period

1000

Contribution

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. FAA Managers Association Inc. PAC

Mailing Address 1015 Atlantic Boulevard
Suite 245

City State Zip Code
Atlantic Beach FL 32233-3313

FEC ID number of contributing
federal political committee.

C C00366070

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

05 / 12 / 2014

Transaction ID : 353-988-c

Amount of Each Receipt this Period

1000

Contribution

Full Name (Last, First, Middle Initial)

B. Federal Express PAC

Mailing Address 942 S Shady Grove Road

City State Zip Code
Memphis TN 38120-4117

FEC ID number of contributing
federal political committee.

C C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000

Date of Receipt

05 / 12 / 2014

Transaction ID : 427-989-c

Amount of Each Receipt this Period

2000

Contribution

Full Name (Last, First, Middle Initial)

C. Independent Community Bankers of America PAC

Mailing Address 1615 L Street NW
Suite 900

City State Zip Code
Washington DC 20036-5623

FEC ID number of contributing
federal political committee.

C C00032698

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

05 / 23 / 2014

Transaction ID : 342-998-c

Amount of Each Receipt this Period

1000

Contribution

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Intel Corporation PAC

Mailing Address 1155 F Street NW
Suite 1025

City Washington State DC Zip Code 20004-1342

FEC ID number of contributing federal political committee.

C C00125641

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500

Date of Receipt

05 / 12 / 2014

Transaction ID : 767-991-c

Amount of Each Receipt this Period

2500

Contribution

Full Name (Last, First, Middle Initial)

B. Smiths Group Services Corp. PAC (Smiths PAC)

Mailing Address 425 3rd Street SW
Suite 875

City Washington State DC Zip Code 20024-3237

FEC ID number of contributing federal political committee.

C C00448324

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

05 / 23 / 2014

Transaction ID : 389-997-c

Amount of Each Receipt this Period

1000

Contribution

Full Name (Last, First, Middle Initial)

C. United Parcel Service Inc. PAC

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee.

C C00064766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500

Date of Receipt

05 / 12 / 2014

Transaction ID : 348-990-c

Amount of Each Receipt this Period

2500

Contribution

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

6000.00

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

15000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLCMailing Address 901 N Washington Street
Suite 700

City Alexandria State VA Zip Code 22314-1535

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-500-973-e

Amount of Each Disbursement this Period

2275.17

Full Name (Last, First, Middle Initial)

B. LVH Consulting

Mailing Address 2119 Paul Spring Road

City Alexandria State VA Zip Code 22307-1803

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 01 2014

Transaction ID : SB21B-368-972-e

Amount of Each Disbursement this Period

1050

Full Name (Last, First, Middle Initial)

C. The Gula Graham GroupMailing Address 499 S Capitol Street SW
Suite 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement
PAC Event/Food & Beverage/Fax/Email/Shipping

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 07 2014

Transaction ID : SB21B-271-974-e

Amount of Each Disbursement this Period

3811.75

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

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

7136.92

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Kelly PAC

A. The Gula Graham Group

Mailing Address 499 S Capitol Street SW
Suite 420

City	State	Zip Code
Washington	DC	20003-4027

Purpose of Disbursement	PAC Fundraising Consulting
-------------------------	----------------------------

Candidate Name

001

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB21B-271-978-e

Amount of Each Disbursement this Period

9625

Full Name (Last, First, Middle Initial)

B. The Gula Graham Group

Date of Disbursement

05 / 19 / 2014

Mailing Address 499 S Capitol Street SW
Suite 420

City	State	Zip Code
Washington	DC	20003-4027

Purpose of Disbursement	PAC Fundraising Consulting
-------------------------	----------------------------

Candidate Name

001

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB21B-271-986-e

Amount of Each Disbursement this Period

1562.5

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Amount of Each Disbursement this Period

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

11187.50

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

18324.42

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Kelly PAC

A. Cotton For Senate

011

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

5000

B. Dr. Monica Wehby for US Senate

MM / DD / YYYY

011

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Age Group	Count
0-4	~1000
5-9	~1000
10-14	~1000
15-19	~1000
20-24	~1000
25-34	~2600
35-44	~1000
45-54	~1000
55-64	~1000
65-74	~1000
75-84	~1000
85-94	~1000
95-104	~1000

C. Joni Ernst for US Senate Inc.

011

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. New Hampshire Republican State Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Mailing Address 10 Water Street

City	State	Zip Code
Concord	NH	03301-4844

Transaction ID : SB23-401-993-e

Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

New Hampshire Republican State Committee

Category/
Type

5000

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For: 2014
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

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

5000.00

15000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Kelly PAC

Full Name (Last, First, Middle Initial)

A. Belknap County Republican Committee

Mailing Address PO Box 14

City	State	Zip Code
Gilman Iron Works	NH	03837-0014

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Belknap County Republican Committee

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SB29-447-985-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

B. Daniel Webster Council, BSA

Mailing Address 571 Holt Avenue

City	State	Zip Code
Manchester	NH	03109-5213

Purpose of Disbursement
Donation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SB29-874-984-e

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

C. New Hampshire Republican State Committee

Mailing Address 10 Water Street

City	State	Zip Code
Concord	NH	03301-4844

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

New Hampshire Republican State Committee

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	21	/	2014

Transaction ID : SB29-401-994-e

Amount of Each Disbursement this Period

5000

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

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

7000.00

7000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Kelly PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Gula Graham Group

Nature of Debt (Purpose):

Administrative/Salary/Overhead: PAC
Fundraising ConsultingMailing Address 499 S Capitol Street SW
Suite 420City State Zip Code
Washington DC 20003-4027

Outstanding Balance Beginning This Period

9625

Transaction ID : SD10-DEBT978

Amount Incurred This Period

0

Payment This Period

9625

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

0.00