

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

Rely on Your Beliefs Fund

ADDRESS (number and street) 209 Pennsylvania Avenue, SE

Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00344648

3. IS THIS REPORT NEW OR AMENDED (N) (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)
Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on M M / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period 08 01 2014 through 08 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 Paul Kilgore

Signature of Treasurer Paul Kilgore [Electronically Filed] Date 10 16 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.

Table with 11 columns and 1 row for Office Use Only.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Rely on Your Beliefs Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		297097.82
(b) Cash on Hand at Beginning of Reporting Period.....	193773.73	
(c) Total Receipts (from Line 19)	32500.00	399338.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	226273.73	696436.09
7. Total Disbursements (from Line 31).....	21994.85	492157.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	204278.88	204278.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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)

Write or Type Committee Name

Rely on Your Beliefs Fund

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

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).....	6000.00	44500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6000.00	44500.00
(b) Political Party Committees	0.00	338.27
(c) Other Political Committees (such as PACs).....	26500.00	354500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32500.00	399338.27
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	32500.00	399338.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32500.00	399338.27

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16994.85	224157.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16994.85	224157.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	268000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21994.85	492157.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21994.85	492157.21

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)	32500.00	399338.27
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32500.00	399338.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16994.85	224157.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16994.85	224157.21

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
 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)
Rely on Your Beliefs Fund

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

Mailing Address 857 Cedar Dr

City Deale State MD Zip Code 20751-9613

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

Name of Employer Cassidy & Associates Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1832

Amount of Each Receipt this Period
2500.00

Receipt

Full Name (Last, First, Middle Initial)
B. Carolyn McDonnell

Mailing Address 1193 Starr Way

City Virginia Beach State VA Zip Code 23454-3054

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

Name of Employer Military Produce Group Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1834

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
C. Balaji Rajan

Mailing Address 490 Eton Dr

City North Barrington State IL Zip Code 60010-2152

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

Name of Employer Ceannate Corp Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1833

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00

**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
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Abbott Laboratories Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Abbott Park Rd # D312
 City North Chicago State IL Zip Code 60064-3502
 FEC ID number of contributing federal political committee. **C** C00040279
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1836
 Amount of Each Receipt this Period
 4000.00
 Receipt

B. American Bakers Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1350 I St NW Ste 1290
 City Washington State DC Zip Code 20005-3305
 FEC ID number of contributing federal political committee. **C** C00016386
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1837
 Amount of Each Receipt this Period
 2500.00
 Receipt

C. Black & Veatch Good Govt Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 11401 Lamar Ave
 City Leawood State KS Zip Code 66211-1508
 FEC ID number of contributing federal political committee. **C** C00012310
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : 40811.C1835
 Amount of Each Receipt this Period
 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	11500.00
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)	PAGE 8 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

A. Boehringer Ingelheim Corp. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 G St NW Ste 1050
 City Washington State DC Zip Code 20005-3829
 FEC ID number of contributing federal political committee. **C** C00420398
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 08 / 06 / 2014
Transaction ID : 40811.C1840
 Amount of Each Receipt this Period
 2500.00
 Receipt

B. Investment Company Insitute PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 H St NW # 1200
 City Washington State DC Zip Code 20005-2110
 FEC ID number of contributing federal political committee. **C** C00105981
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 08 / 06 / 2014
Transaction ID : 40811.C1838
 Amount of Each Receipt this Period
 5000.00
 Receipt

C. National Beer Wholesalers Assoc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 King St
 City Alexandria State VA Zip Code 22314-2950
 FEC ID number of contributing federal political committee. **C** C00144766
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 08 / 06 / 2014
Transaction ID : 40811.C1841
 Amount of Each Receipt this Period
 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: 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)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)
A. National Emergency Medicine PAC

Mailing Address PO Box 619911
 Suite 325

City Dfw Airport State TX Zip Code 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : 40811.C1839

Amount of Each Receipt this Period
 2500.00

Receipt

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 General
 Other (specify) ▼

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 General
 Other (specify) ▼

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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	26500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. GMD Technologies

Mailing Address PO Box 3663

City Jackson Hole State WY Zip Code 83001-3663

Purpose of Disbursement
PAC IT Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : 40912.E2966

Amount of Each Disbursement this Period

112.50

PAC IT SERVICES

Full Name (Last, First, Middle Initial)

B. Thompson Communications

Mailing Address PO Box 5

City Marshfield State MO Zip Code 65706-0005

Purpose of Disbursement
See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : 40819.E2962

Amount of Each Disbursement this Period

12897.89

SEE BELOW

Full Name (Last, First, Middle Initial)

C. Thompson Communications

Mailing Address PO Box 5

City Marshfield State MO Zip Code 65706-0005

Purpose of Disbursement
PAC Payroll Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : 40819.E2963

Amount of Each Disbursement this Period

730.07

[MEMO ITEM]
MEMO: PAC PAYROLL EXPENSE

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

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

13010.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Keri Ann Hayes

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC Salary & Benefits

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : 40819.E2964

Amount of Each Disbursement this Period

12167.82

[MEMO ITEM]

MEMO: PAC SALARY & BENEFITS

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO Box 19769

City Irvine State CA Zip Code 92623-9769

Purpose of Disbursement
PAC Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : 40912.E2982

Amount of Each Disbursement this Period

163.29

PAC TELEPHONE

Full Name (Last, First, Middle Initial)

C. Visa

Mailing Address PO Box 4512

City Carol Stream State IL Zip Code 60197-4512

Purpose of Disbursement
See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2953

Amount of Each Disbursement this Period

3342.32

SEE BELOW

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

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

3505.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address PO Box 72470244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
PAC Shipping

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2954

Amount of Each Disbursement this Period

41.10

[MEMO ITEM]
MEMO: PAC SHIPPING

Full Name (Last, First, Middle Initial)

B. Fresh Connections

Mailing Address 1114 Herndon Pkwy

City Herndon State VA Zip Code 20170-5577

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2955

Amount of Each Disbursement this Period

253.19

[MEMO ITEM]
MEMO: PAC EVENT CATERING

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197-6463

Purpose of Disbursement
PAC Telephone

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2956

Amount of Each Disbursement this Period

154.25

[MEMO ITEM]
MEMO: PAC TELEPHONE

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 1200 E Algonquin Rd

City Arlington Heights State IL Zip Code 60005-4712

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2957

Amount of Each Disbursement this Period

847.00

[MEMO ITEM]

MEMO: PAC AIRFARE

Full Name (Last, First, Middle Initial)

B. Bistro Bis

Mailing Address 15 E St NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2958

Amount of Each Disbursement this Period

775.00

[MEMO ITEM]

MEMO: PAC EVENT CATERING

Full Name (Last, First, Middle Initial)

C. Asticou Inn

Mailing Address 15 Peabody Dr

City Northeast Harbor State ME Zip Code 04662-

Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : 40811.E2959

Amount of Each Disbursement this Period

791.00

[MEMO ITEM]

MEMO: PAC LODGING

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Dan Williams

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1107

Purpose of Disbursement
PAC Rent & Phones

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 21 / 2014

Transaction ID : 40912.E2967

Amount of Each Disbursement this Period

478.85

PAC RENT & PHONES

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

478.85

16994.85

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

A. Friends of Blaine Luetkemeyer

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
CONTRIBUTION

Candidate Name
W BLAINE LUETKEMEYER

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼
 State: MO District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2014

Transaction ID : 40912.E2965

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

5000.00
