

# 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

**TEA PARTY PATRIOTS CITIZENS FUND**

ADDRESS (number and street) 2295 TOWNE LAKE PKWY STE 116-328

Check if different than previously reported. (ACC)

WOODSTOCK GA 30189

2. **FEC IDENTIFICATION NUMBER ▼** C C00540898 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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)
- Mar 20 (M3)
- Apr 20 (M4)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- 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 PAUL A KILGORE

Signature of Treasurer PAUL A KILGORE *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 06 / 20 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**TEA PARTY PATRIOTS CITIZENS 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"/>		1069925.11
(b) Cash on Hand at Beginning of Reporting Period.....	911503.65	
(c) Total Receipts (from Line 19) .....	862782.16	3452089.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1774285.81	4522014.11
7. Total Disbursements (from Line 31).....	1258150.02	4005878.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	516135.79	516135.79
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	9921.61	

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

Write or Type Committee Name

**TEA PARTY PATRIOTS CITIZENS 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).....	428353.50	1049141.96
(ii) Unitemized .....	434428.66	2392987.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	862782.16	3442129.21
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	862782.16	3442129.21
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	9959.79
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))..... ▶	862782.16	3452089.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	862782.16	3452089.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	652283.51	3181908.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	652283.51	3181908.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	605866.51	823970.01
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)) ..	1258150.02	4005878.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1258150.02	4005878.32

**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) .....	862782.16	3442129.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	862782.16	3442129.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	652283.51	3181908.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9959.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	652283.51	3171948.52

**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 272  
(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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ANNA ABERS**

Mailing Address 4600 VIA DOLCE APT 306

City State Zip Code  
MARINA DL REY CA 90292

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263844**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 24630 KENNETH DRIVE

City State Zip Code  
DENHAM SPRINGS LA 70726

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : SA11AI.270529**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR CONRAD R ADAMS II**

Mailing Address 17741 WOODRIDGE DR

City State Zip Code  
SOUTH BEND IN 46635

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263229**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 7 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. BARBARA F ADRIC**

Mailing Address 2767 E ATSINA DR

City State Zip Code  
SIERRA VISTA AZ 85650

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014  
**Transaction ID : SA11AI.267127**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 30 W LAMBERT LN UNIT 217

City State Zip Code  
ORO VALLEY AZ 85737

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.268967**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 30 W LAMBERT LN UNIT 217

City State Zip Code  
ORO VALLEY AZ 85737

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2014  
**Transaction ID : SA11AI.270578**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00

**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 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RALPH AKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1425 CORONADO ST

City SALINA State KS Zip Code 67401

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.266613**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 16540 GRAYS BAY BLVD

City WAYZATA State MN Zip Code 55391

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 12 / 2014  
**Transaction ID : SA11AI.264404**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 186

City HINSDALE State MT Zip Code 59241

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
05 / 01 / 2014  
**Transaction ID : SA11AI.268244**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1300.00

**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 9 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HAROLD ALLEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 713 WAKEFIELD

City EL PASO	State TX	Zip Code 79922
FEC ID number of contributing federal political committee. C		
Name of Employer MMI	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Date of Receipt  
05 / 03 / 2014  
**Transaction ID : SA11AI.268578**

Amount of Each Receipt this Period  
150.00

**B. HAROLD ALLEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 713 WAKEFIELD

City EL PASO	State TX	Zip Code 79922
FEC ID number of contributing federal political committee. C		
Name of Employer MMI	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt  
05 / 19 / 2014  
**Transaction ID : SA11AI.269499**

Amount of Each Receipt this Period  
150.00

**C. MR ALBERT J AMATUZIO**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1831 VALHALLA DR

City DULUTH	State MN	Zip Code 55811
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
05 / 12 / 2014  
**Transaction ID : SA11AI.264442**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> 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 10 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MRS ELIZABETH A ANDERLIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1180 GULF BLVD APT 1001  
 ELIZABETH A ANDERLIK REV TRUST  
 City CLEARWATER BEACH State FL Zip Code 33767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260265**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. HENRY ASCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 509 EDINBURGH LN.  
 City COPPELL State TX Zip Code 75019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270311**  
 Amount of Each Receipt this Period  
 100.00

**C. MYRA ASPLUNDH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 11  
 City BRYN ATHYN State PA Zip Code 19009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266807**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 11 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MYRA ASPLUNDH**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 11

City BRYN ATHYN State PA Zip Code 19009

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.275260**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address PO BOX 661

City SAG HARBOR State NY Zip Code 11963

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270312**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 1810 W 7TH ST

City BROOKLYN State NY Zip Code 11223

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.273343**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 12 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOSHUA BALES**  
Full Name (Last, First, Middle Initial)

Mailing Address 6157 FOXCROFT AVE.

City LAS VEGAS	State NV	Zip Code 89108
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.269546**

Amount of Each Receipt this Period  
500.00

**B. MR. HENRY J BALLESTER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1686

City BUSHNELL	State FL	Zip Code 33513
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : SA11AI.266408**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 165 CHRISTOPHER ST APT 6CC

City NEW YORK	State NY	Zip Code 10014
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263186**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 13 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JEANNE S BARNES**  
Full Name (Last, First, Middle Initial)

Mailing Address 165 CHRISTOPHER ST APT 6CC

City	State	Zip Code
NEW YORK	NY	10014

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266894**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 330 FAWNLAKE DR

City	State	Zip Code
HOUSTON	TX	77079

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

Name of Employer	Occupation
INFORMATION REQUESTED	INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263821**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2060 W. RICHTON RD.

City	State	Zip Code
STEGER	IL	60475

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

Name of Employer	Occupation
MIDSTATES CORP	MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.268775**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 14 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JO ANN BAUGHMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1269

City PHILOMATH State OR Zip Code 97370

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.268405**

Amount of Each Receipt this Period  
 62.00

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

Mailing Address 3524 WEST HAMPTON DRIVE

City MARIETTA State GA Zip Code 30064

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.270092**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 720 30TH ST

City ANACORTES State WA Zip Code 98221

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.274176**

Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.00

**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 15 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JANICE BEECHICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 6410 RALEIGH ST

City ARVADA State CO Zip Code 80003

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

Name of Employer N. METRO COMM. SERVICES Occupation PERSONAL ASSISTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2014  
**Transaction ID : SA11AI.266971**

Amount of Each Receipt this Period  
150.00

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

Mailing Address PO BOX 6928

City BEND State OR Zip Code 97708

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014  
**Transaction ID : SA11AI.266122**

Amount of Each Receipt this Period  
130.00

**C. MISS SUE E. BLAKEMORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 14052 N 14TH PL

City PHOENIX State AZ Zip Code 85022

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2014  
**Transaction ID : SA11AI.261436**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 530.00

**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 16 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GLEN H BLOMGREN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4178 W KELLY AVE

City FRESNO State CA Zip Code 93722

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : SA11AI.263536**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 4178 W KELLY AVE

City FRESNO State CA Zip Code 93722

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.265087**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1255 N BROADWAY

City ESCONDIDO State CA Zip Code 92026

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11AI.266521**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 17 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. DOUG BOMBARD**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1566

City AVALON State CA Zip Code 90704

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
05 / 05 / 2014  
**Transaction ID : SA11AI.260957**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 977 COACHWAY

City ANNAPOLIS State MD Zip Code 21401

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 01 / 2014  
**Transaction ID : SA11AI.268260**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 977 COACHWAY

City ANNAPOLIS State MD Zip Code 21401

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 06 / 2014  
**Transaction ID : SA11AI.268728**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> 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 18 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM H BOWEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1714 LOS BERROS RD

City State Zip Code  
ARROYO GRANDE CA 93420

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.262742**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2539 S WILLOW CREEK DR

City State Zip Code  
PERU IN 46970

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.262591**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 6100 MOUNTAIN RD.

City State Zip Code  
DOVER PA 17315

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014  
**Transaction ID : SA11AI.267302**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 19 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MS BARBARA A BOYLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1299 BRIARWOOD DR APT 329

City SAN LUIS OBISPO	State CA	Zip Code 93401
-------------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11AI.267220**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 8904 RIDGECREST CT

City FREDERICKSBURG	State VA	Zip Code 22408
------------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : SA11AI.269854**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2151 SHEFFIELD DR.

City JACKSON	State MS	Zip Code 39211
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : SA11AI.269088**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> 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 20 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. EDITH M BRANDON**

Mailing Address 3001 TECKLA BLVD

City State Zip Code  
AMARILLO TX 79106

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267372**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 18584 VISTA DR

City State Zip Code  
JAMESTOWN CA 95327

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267746**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1314 BONITA BAHIA

City State Zip Code  
BENICIA CA 94510

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266991**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 21 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ALBERT J. BRAUER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 447

City FLORENCE State OR Zip Code 97439

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.265339**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 821 S ARTHUR ST

City GRAND ISLAND State NE Zip Code 68803

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

Name of Employer WALMART Occupation FLOOR SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264402**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4821 EASTHILL DR

City ROANOKE State VA Zip Code 24018

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260374**

Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	340.00
<b>TOTAL</b> 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 22 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address 3621 BLUE HILL CT

City ELLICOTT CITY State MD Zip Code 21042

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
05 / 30 / 2014  
**Transaction ID : SA11AI.267718**

Amount of Each Receipt this Period  
25.00

**B. MS PATRICIA S BRODERICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 QUAIL LN

City MOORESVILLE State NC Zip Code 28117

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
05 / 30 / 2014  
**Transaction ID : SA11AI.270203**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 374 STILSON CANYON RD.

City CHICO State CA Zip Code 95928

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
05 / 01 / 2014  
**Transaction ID : SA11AI.260080**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.00

**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 23 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN L. BROUILLARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 374 STILSON CANYON RD.

City CHICO	State CA	Zip Code 95928
---------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267141**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 4608 INVERNESS DR

City TYLER	State TX	Zip Code 75703
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

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

**Transaction ID : SA11AI.265523**

Amount of Each Receipt this Period  
500.00

**C. MR I DAVID BUFKIN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 630

City BRENHAM	State TX	Zip Code 77834
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : SA11AI.261723**

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 24 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN J BURGESS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 21805 TEGLET

City MISSION VIEJO State CA Zip Code 92692

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

Name of Employer THE BURGESS ENGINEERING GROUP Occupation CONSULTING ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : SA11AI.270640**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2015 CREEK RD

City HAINESPORT State NJ Zip Code 08036

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.259981**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 81 MINIVALE RD

City STAMFORD State CT Zip Code 06907

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267338**

Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 25 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MR FRED M BUTLER**

Mailing Address 1251 COUNTRY CLUB DR

City LAUGHLIN State NV Zip Code 89029

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269899**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2110 T STREET, S.E.

City WASHINGTON State DC Zip Code 20020

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : SA11AI.270487**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 616 PARKSIDE DR

City THIBODAUX State LA Zip Code 70301

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

Name of Employer Occupation  
SELF EMPLOYED IT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.265861**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00

**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 26 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CARL G. CALDWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2292

City TOPEKA State KS Zip Code 66601

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

Name of Employer VA HOSPITAL TOPEKA KANSAS Occupation REGISTERED NURSE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260756**

Amount of Each Receipt this Period  
 100.00

**B. MS CHARLOTTE C CALLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1139 SHORELINE LN

City WINTER HAVEN State FL Zip Code 33884

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266729**

Amount of Each Receipt this Period  
 800.00

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

Mailing Address 3355 MISSION AVE STE 111

City OCEANSIDE State CA Zip Code 92058

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262838**

Amount of Each Receipt this Period  
 75.00

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

**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 27 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR JOSEPH M CANNELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6795 LAW DR  
 City EAST SYRACUSE State NY Zip Code 13057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266858**  
 Amount of Each Receipt this Period  
 300.00

**B. SUE M CANNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6420 W LAKERIDGE RD  
 City LAKEWOOD State CO Zip Code 80227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : SA11AI.266359**  
 Amount of Each Receipt this Period  
 5000.00

**C. BEVERLY T. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 328  
 City FORT SUMNER State NM Zip Code 88119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266690**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7300.00
<b>TOTAL</b> 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 28 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES P CASEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 283 SAN REMO ST

City PALM DESERT State CA Zip Code 92260

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.267151**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 3333 GULF SHORE BLVD N APT V10

City NAPLES State FL Zip Code 34103

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
05 / 01 / 2014  
**Transaction ID : SA11AI.260029**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 1626 S 18TH ST

City MANITOWOC State WI Zip Code 54220

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.267331**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5350.00

**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 29 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR VICTOR I CHAPMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4201 CLARK LN LOT 69  
 City COLUMBIA State MO Zip Code 65202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263556**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. CATHY CHASTEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1122 MOCKINGBIRD LN  
 City LEBANON State OH Zip Code 45036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.272791**  
 Amount of Each Receipt this Period  
 250.00

**C. EUGENE COATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 MORIAH WAY NE  
 City RYDAL, GA State GA Zip Code 30171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRAPHIC PACKAGING INTL Occupation SR. TECH. SERVICE ENG.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269834**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 30 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN COKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4112 SOUTHERN OAKS RD.

City CLEBURNE	State TX	Zip Code 76031
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2014  
**Transaction ID : SA11AI.268626**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2923 SAN JUAN BLVD.

City BELMONT	State CA	Zip Code 94002
-----------------	-------------	-------------------

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

Name of Employer ADVANCED CLINICAL	Occupation CLINICAL RESEARCH CONSULTANT
---------------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269831**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2923 SAN JUAN BLVD.

City BELMONT	State CA	Zip Code 94002
-----------------	-------------	-------------------

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

Name of Employer ADVANCED CLINICAL	Occupation CLINICAL RESEARCH CONSULTANT
---------------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270164**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 31 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. SHELLEY COLEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2923 SAN JUAN BLVD.

City Belmont State CA Zip Code 94002

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

Name of Employer: ADVANCED CLINICAL Occupation: CLINICAL RESEARCH CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt: 05 / 31 / 2014  
**Transaction ID : SA11AI.270463**

Amount of Each Receipt this Period: 50.00

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

Mailing Address 102 WOODCREEK DR

City Wimberley State TX Zip Code 78676

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

Name of Employer: VETS TRUCKING Occupation: OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 13 / 2014  
**Transaction ID : SA11AI.273874**

Amount of Each Receipt this Period: 300.00

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

Mailing Address 188 KNOX ST

City Millinocket State ME Zip Code 04462

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

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 09 / 2014  
**Transaction ID : SA11AI.263166**

Amount of Each Receipt this Period: 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> 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 32 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MS KIM U CONANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14735 POWAY MESA DR  
 City POWAY State CA Zip Code 92064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.275957**  
 Amount of Each Receipt this Period  
 100.00

**B. ROBERT T CONNELLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 SANDALWOOD CIR  
 City LAWRENCEVILLE State GA Zip Code 30046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266898**  
 Amount of Each Receipt this Period  
 50.00

**C. JEFFREY L. CONNOLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2980 FAIR LADY LN  
 City LAS CRUCES State NM Zip Code 88005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.262442**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 33 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MARY COOK**

Mailing Address 3007 OLD WHITES MILL RD.

City MARYVILLE      State TN      Zip Code 37803

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

Name of Employer NONE      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264325**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 585 S VALLEY DR

City LAS CRUCES      State NM      Zip Code 88005

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

Name of Employer SELF EMPLOYED      Occupation ACCOUNTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.273726**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 3512 SHEFFIELD COURT

City ARLINGTON      State TX      Zip Code 76013

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

Name of Employer RUTLEDGE CRAIN & COMPANY PC      Occupation CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.268878**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 275.00

**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 34 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. LEWIS CRAIN**

Mailing Address 3512 SHEFFIELD COURT

City ARLINGTON State TX Zip Code 76013

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

Name of Employer RUTLEDGE CRAIN & COMPANY PC Occupation CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 14 / 2014**

Transaction ID : **SA11AI.269224**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**B. MR THOMAS J CRAWFORD**

Mailing Address 1579 RAMBLEWOOD AVE

City COLUMBUS State OH Zip Code 43235

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 16 / 2014**

Transaction ID : **SA11AI.265625**

Amount of Each Receipt this Period  
**400.00**

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

Mailing Address 21914 EVALYN AVE

City TORRANCE State CA Zip Code 90503

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

Transaction ID : **SA11AI.262770**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **475.00**

**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 35 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RODDIE CROUCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 RIVER FALLS DR  
 City ROSWELL State GA Zip Code 30076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.268850**  
 Amount of Each Receipt this Period  
 100.00

**B. JOHN CUNNINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 280 PARKLAWN CIR  
 City COLUMBUS State OH Zip Code 43213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.275306**  
 Amount of Each Receipt this Period  
 75.00

**C. MR JIM CURTIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6407 SW 10TH AVE  
 City TOPEKA State KS Zip Code 66615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267157**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00  
**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 36 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MILLARD E. DAILEY**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4084

City State Zip Code  
FAIRVIEW HEIGHTS IL 62208

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

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  
05 / 21 / 2014  
**Transaction ID : SA11AI.274712**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2629 EE RD

City State Zip Code  
VIRGIL KS 66870

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2014  
**Transaction ID : SA11AI.266473**

Amount of Each Receipt this Period  
400.00

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

Mailing Address PO BOX 791719

City State Zip Code  
PAIA HI 96779

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2014  
**Transaction ID : SA11AI.273888**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<b>TOTAL</b> 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 37 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CAROLYN J DAMON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 791719

City PAIA State HI Zip Code 96779

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : SA11AI.265429**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 4539 WHITES CREEK RD

City PRICHARD State WV Zip Code 25555

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : SA11AI.264256**

Amount of Each Receipt this Period  
**400.00**

**C. MR WILLIAM S DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 6300 RIDGLEA PL STE 1200

City FORT WORTH State TX Zip Code 76116

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 05 / 2014**

**Transaction ID : SA11AI.261117**

Amount of Each Receipt this Period  
**10000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>10425.00</b>
<b>TOTAL</b> 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 38 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOY L. DE FELICE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2319 W LONGFELLOW AVE

City SPOKANE State WA Zip Code 99205

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 30 / 2014  
**Transaction ID : SA11AI.270173**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 17 SWALLOW RD

City HOLLAND State PA Zip Code 18966

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

Name of Employer SELF EMPLOYED Occupation ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.269782**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 8047 CHALMERS AVE

City WARREN State MI Zip Code 48089

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
05 / 05 / 2014  
**Transaction ID : SA11AI.260868**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 39 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. NANCY DILL**

Mailing Address 90 PROSPECT HIL RD

City BREWSTER	State NY	Zip Code 10509
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.275791**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. ERIKA DISSMANN-BECK**

Mailing Address PO BOX 167

City AMSTERDAM	State NY	Zip Code 12010
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267699**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. ERIKA DISSMANN-BECK**

Mailing Address PO BOX 167

City AMSTERDAM	State NY	Zip Code 12010
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267700**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 40 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GEOFFRE DONATELLI**  
Full Name (Last, First, Middle Initial)

Mailing Address 7849 E WHILEAWAY PL

City TUCSON State AZ Zip Code 85750

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2014  
**Transaction ID : SA11AI.269388**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1416 LINDEN DR.

City NEW CASTLE State IN Zip Code 47362

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261727**

Amount of Each Receipt this Period  
 60.00

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

Mailing Address 150 EDGEWATER WAY

City MERRITT ISLAND State FL Zip Code 32953

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262547**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	660.00
<b>TOTAL</b> 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 41 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MATTHEW DOYLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 55483 OAKHILL

City LA QUINTA	State CA	Zip Code 92253
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267567**

Amount of Each Receipt this Period  
 125.00

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

Mailing Address 3948 CELINA HWY

City ALLONS	State TN	Zip Code 38541
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267318**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1115 41ST AVE E

City SEATTLE	State WA	Zip Code 98112
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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  
 05 / 22 / 2014  
**Transaction ID : SA11AI.266435**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5225.00
<b>TOTAL</b> 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 42 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ROBIN F DZIAMA**  
Full Name (Last, First, Middle Initial)

Mailing Address 5005 LITTLE SYCAMORE RD

City TAZEWELL State TN Zip Code 37879

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : SA11AI.263508**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address W10769 WILDWOOD WAY

City POYNETTE State WI Zip Code 53955

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

Name of Employer NONE Occupation RETIRED

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  
**05 / 01 / 2014**

**Transaction ID : SA11AI.260033**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 611 CHATHAM CT

City NEENAH State WI Zip Code 54956

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

Name of Employer AMERICAN PAPER CONVERTERS INC. Occupation CORPORATE EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : SA11AI.264743**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1250.00</b>
<b>TOTAL</b> 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 43 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MELINA J. EDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2495 CORAL BROOKE DR

City SIERRA VISTA	State AZ	Zip Code 85650
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2014

**Transaction ID : SA11AI.265112**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 17021 TENNYSON PL

City GRANADA HILLS	State CA	Zip Code 91344
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2014

**Transaction ID : SA11AI.274156**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 32 HIGHLAND ST.

City CAMBRIDGE	State MA	Zip Code 02138
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2014

**Transaction ID : SA11AI.273293**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> 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 44 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILMA M EDWARDS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2948

City DEL MAR State CA Zip Code 92014

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 02 / 2014  
Transaction ID : SA11AI.260259

Amount of Each Receipt this Period  
200.00

**B. MR FRANCIS D EICKBUSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 329 N 930 E

City LINDON State UT Zip Code 84042

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 27 / 2014  
Transaction ID : SA11AI.266661

Amount of Each Receipt this Period  
150.00

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

Mailing Address PO BOX 39

City OREGON State IL Zip Code 61061

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
05 / 31 / 2014  
Transaction ID : SA11AI.270624

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 385.00

**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 45 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. PHILIP EISERLOH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1283 WATERSTONE PKWY

City BOERNE	State TX	Zip Code 78006
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269462**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1283 WATERSTONE PKWY

City BOERNE	State TX	Zip Code 78006
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.270052**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 853 - 97TH AVENUE SE

City BELLEVUE	State WA	Zip Code 98004
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2014  
**Transaction ID : SA11AI.268641**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 46 OF 272
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. JOHN PALMER EVANS</b>		Date of Receipt
Mailing Address PO BOX 458		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
INDIANOLA	WA	98342
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.267107</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
CONNX SOLUTION	CONSULTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JON J EWIGLEBEN</b>		Date of Receipt
Mailing Address 25743 SPRING DR		<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
HAYWARD	CA	94542
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.273295</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="65.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS SIMON J FALIC</b>		Date of Receipt
Mailing Address 150 HARBOUR WAY		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
BAL HARBOUR	FL	33154
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.272405</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="515.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 47 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MITCHEL FARR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1861 W AZALEA DR  
City CHANDLER State AZ Zip Code 85248  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED Occupation ENGINEER  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt  
**05 / 22 / 2014**  
Transaction ID : **SA11AI.275035**  
Amount of Each Receipt this Period  
**75.00**

**B. RAY FAUBION**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2306  
City HIGHLANDS State NC Zip Code 28741  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **400.00**

Date of Receipt  
**05 / 01 / 2014**  
Transaction ID : **SA11AI.260171**  
Amount of Each Receipt this Period  
**100.00**

**C. MR. ALBERT D FAUST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 161 WESTMINSTER DR APT 1D  
City DOVER State DE Zip Code 19904  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt  
**05 / 06 / 2014**  
Transaction ID : **SA11AI.261217**  
Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **275.00**  
**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 48 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. JOHN A FEHSENFELD</b>		Date of Receipt
Mailing Address PO BOX 35200		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAS VEGAS	NV	89133
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.266615</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. RICHARD L FELTON</b>		Date of Receipt
Mailing Address 107 HILLS CREEK DR		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
WELLSBORO	PA	16901
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.267361</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MYRON G FETCHO</b>		Date of Receipt
Mailing Address 720 E CAROLINE CT		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
SPOKANE	WA	99218
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.267306</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



**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 49 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. KAY P FINLAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 LA CERRA CIR

City RANCHO MIRAGE	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261973**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 10 LA CERRA CIR

City RANCHO MIRAGE	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267170**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 338 WESTMINSTER DR.

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269954**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 50 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JANIS FITZGERALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 4834 ELKHORN HILL DR

City SUWANEE	State GA	Zip Code 30024
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

**Transaction ID : SA11AI.268953**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 75

City THURMONT	State MD	Zip Code 21788
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2014

**Transaction ID : SA11AI.266489**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 4834 ELKHORN HILL DR

City SUWANEE	State GA	Zip Code 30024
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

**Transaction ID : SA11AI.270350**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> 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 51 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID FITZWILLIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 CATHEDRAL AVE  
 City WASHINGTON State DC Zip Code 20016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.268789**  
 Amount of Each Receipt this Period  
 25.00

**B. DAVID FITZWILLIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 CATHEDRAL AVE  
 City WASHINGTON State DC Zip Code 20016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2014  
**Transaction ID : SA11AI.269054**  
 Amount of Each Receipt this Period  
 10.00

**C. DAVID FITZWILLIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 CATHEDRAL AVE  
 City WASHINGTON State DC Zip Code 20016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.269136**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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 52 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID FITZWILLIAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 4100 CATHEDRAL AVE

City WASHINGTON State DC Zip Code 20016

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.269558**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4100 CATHEDRAL AVE

City WASHINGTON State DC Zip Code 20016

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2014  
**Transaction ID : SA11AI.269665**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 4100 CATHEDRAL AVE

City WASHINGTON State DC Zip Code 20016

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269871**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 53 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID FITZWILLIAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 4100 CATHEDRAL AVE

City WASHINGTON State DC Zip Code 20016

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11AI.270029**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 4100 CATHEDRAL AVE

City WASHINGTON State DC Zip Code 20016

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : SA11AI.270496**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 15744 BEVERLY STREET

City OVERLAND PARK State KS Zip Code 66223

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

Name of Employer BDP ENTERPRISES, INC Occupation ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : SA11AI.269821**

Amount of Each Receipt this Period  
**75.00**

**SUBTOTAL** of Receipts This Page (optional)..... **125.00**

**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 54 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. CELIA FORKER</b>		Date of Receipt
Mailing Address 1942 STELZER RD.		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City State Zip Code COLUMBUS OH 43219		<b>Transaction ID : SA11AI.267371</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="80.50"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="391.42"/>	

Full Name (Last, First, Middle Initial) <b>B. MR STEPHEN G FOWLER</b>		Date of Receipt
Mailing Address 250 E THORNDIKE RD		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City State Zip Code THORNDIKE ME 04986		<b>Transaction ID : SA11AI.263528</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer SELF EMPLOYED	Occupation FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="351.00"/>	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM FRANK</b>		Date of Receipt
Mailing Address 5319 TALLOWOOD WAY		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City State Zip Code NAPLES FL 34116		<b>Transaction ID : SA11AI.270547</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="205.50"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 55 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RONALD A FRASER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2003 CHEROKEE RD

City CARPENTERSVLE State IL Zip Code 60110

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2014  
**Transaction ID : SA11AI.269402**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 7734 CHANTILLY CIRCLE

City GALVESTON State TX Zip Code 77551

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.268373**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 4916 TANFIELD DRIVE

City HENRICO State VA Zip Code 23228

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

Name of Employer CORESTAFF Occupation CONSTRUCTION COORDINATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.273939**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

**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 56 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ROBERT D FREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 29976 FOREST AVE  
City APLINGTON State IA Zip Code 50604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **325.00**

Date of Receipt  
05 / 07 / 2014  
**Transaction ID : SA11AI.261718**  
Amount of Each Receipt this Period  
**75.00**

**B. ROBERT D FREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 29976 FOREST AVE  
City APLINGTON State IA Zip Code 50604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **425.00**

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.267271**  
Amount of Each Receipt this Period  
**100.00**

**C. ROYAL FRIEDLY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1345 W 219 ST  
City TORRANCE State CA Zip Code 90501  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **300.00**

Date of Receipt  
05 / 08 / 2014  
**Transaction ID : SA11AI.268954**  
Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **275.00**  
**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 57 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DENISE FRINZI**  
Full Name (Last, First, Middle Initial)

Mailing Address 876 CHESTNUT GROVE CIR

City DANDRIDGE State TN Zip Code 37725

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : SA11AI.273092**

Amount of Each Receipt this Period  
**110.00**

**B. MR MICHAEL A FRISBIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 7793 E HIGHWAY K4

City GYPSUM State KS Zip Code 67448

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 / 05 / 2014**

**Transaction ID : SA11AI.260678**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address 7793 EAST HIWAY 4

City GYPSUM State KS Zip Code 67448

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : SA11AI.269423**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2360.00</b>
<b>TOTAL</b> 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 58 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL J FUGLE</b>		Date of Receipt
Mailing Address 4815 SHELDON RD		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCHESTER	MI	48306
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.263585</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL J FUGLE</b>		Date of Receipt
Mailing Address 4815 SHELDON RD		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCHESTER	MI	48306
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.266804</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL J FUGLE</b>		Date of Receipt
Mailing Address 4815 SHELDON RD		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCHESTER	MI	48306
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.266805</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="290.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 59 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MICHAEL J FUGLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 4815 SHELDON RD

City ROCHESTER State MI Zip Code 48306

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.266998**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 412 BROOK GLENN RD

City TAYLORS State SC Zip Code 29687

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 02 / 2014  
**Transaction ID : SA11AI.260282**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 609 HAYES ST

City ALTUS State OK Zip Code 73521

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 30 / 2014  
**Transaction ID : SA11AI.270234**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00

**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 60 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MR THOMAS GASKINS JR</b>		Date of Receipt
Mailing Address 1073 COUNCIL RD		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
VENUS	FL	33960
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.267183</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="400.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	TURKEY CALL MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ROBERT L. GIBBS</b>		Date of Receipt
Mailing Address 402 OVERLOOK DR		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
MONROEVILLE	AL	36460
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.260643</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. HERBERT GIBBS</b>		Date of Receipt
Mailing Address 5802 FLEET CT		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCKLIN	CA	95765
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.269784</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	DENTIST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 61 OF 272
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CURT GIBSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 28770 BRUIN PL

City SAUGUS	State CA	Zip Code 91390
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2014

**Transaction ID : SA11AI.269196**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 28770 BRUIN PL

City SAUGUS	State CA	Zip Code 91390
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

**Transaction ID : SA11AI.270317**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 789 W ARMELLS RD

City FORSYTH	State MT	Zip Code 59327
-----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : SA11AI.260754**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 62 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DOUGLAS GLEASON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6305 CANDLEPATH TRAIL

City PLANO	State TX	Zip Code 75023
---------------	-------------	-------------------

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

Name of Employer NASSAU SERVICES INC.	Occupation CONSULTING ENGINEER
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2014

**Transaction ID : SA11AI.269510**

Amount of Each Receipt this Period  
50.00

**B. DOUGLAS GLEASON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6305 CANDLEPATH TRAIL

City PLANO	State TX	Zip Code 75023
---------------	-------------	-------------------

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

Name of Employer NASSAU SERVICES INC.	Occupation CONSULTING ENGINEER
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2014

**Transaction ID : SA11AI.269853**

Amount of Each Receipt this Period  
100.00

**C. ANN GLENDINNING**  
Full Name (Last, First, Middle Initial)  
Mailing Address 318 S. BEACH RD.

City HOBE SOUND	State FL	Zip Code 33455
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2014

**Transaction ID : SA11AI.268542**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 63 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ROLAND L. GLESSNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 522 CHRISTINA ST.

City JUNCTION CITY State KS Zip Code 66441

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
05 / 07 / 2014  
Transaction ID : SA11AI.261497

Amount of Each Receipt this Period  
205.00

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

Mailing Address 301 W REDWOOD ST APT 11

City PARKSTON State SD Zip Code 57366

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
05 / 09 / 2014  
Transaction ID : SA11AI.263167

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 855 N FREDERICK ST

City ARLINGTON State VA Zip Code 22205

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
05 / 02 / 2014  
Transaction ID : SA11AI.260224

Amount of Each Receipt this Period  
90.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2295.00
<b>TOTAL</b> 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 64 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID R GOLLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 131 EAST HIGH STREET

City State Zip Code  
JEFFERSON CITY MO 65101

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014  
**Transaction ID : SA11AI.270106**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2406 OCEAN DR

City State Zip Code  
VERO BEACH FL 32963

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2014  
**Transaction ID : SA11AI.260508**

Amount of Each Receipt this Period  
210.00

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

Mailing Address 861 WOODSIDE TRAILS DR

City State Zip Code  
BALLWIN MO 63021

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2014  
**Transaction ID : SA11AI.265351**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00

**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 65 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address 1660 PARKCREST CIR APT 300

City RESTON      State VA      Zip Code 20190

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : SA11AI.266476**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3690 KEEN AVE

City COLUMBIA      State PA      Zip Code 17512

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260202**

Amount of Each Receipt this Period  
35.00

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

Mailing Address PO BOX 91610

City LAFAYETTE      State LA      Zip Code 70509

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

Name of Employer Occupation  
SELF EMPLOYED INVESTOR

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  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261530**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 385.00

**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 66 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MORT GROSCH**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 270

City ALBION State NE Zip Code 68620

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

Name of Employer SELF EMPLOYED Occupation WATER WELL DRILLING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : SA11AI.266670**

Amount of Each Receipt this Period  
**110.00**

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

Mailing Address 2300 W VICTORIA AVE

City MONTEBELLO State CA Zip Code 90640

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : SA11AI.269414**

Amount of Each Receipt this Period  
**50.00**

**C. MR FELIX T GROSSMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 523 W 6TH ST STE 723

City LOS ANGELES State CA Zip Code 90014

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11AI.267429**

Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>660.00</b>
<b>TOTAL</b> 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 67 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MARIANNE S GWINN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3321 BEVERLY DR  
City DALLAS State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **225.00**

Date of Receipt **05 / 28 / 2014**  
**Transaction ID : SA11AI.269856**  
Amount of Each Receipt this Period **250.00**

**B. KENNETH HALVERSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 68  
City KASSON State MN Zip Code 55944  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 15 / 2014**  
**Transaction ID : SA11AI.269312**  
Amount of Each Receipt this Period **250.00**

**C. MRS ELIZABETH O HAMILTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2779 BLAIRSTONE CT  
City TALLAHASSEE State FL Zip Code 32301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 29 / 2014**  
**Transaction ID : SA11AI.267395**  
Amount of Each Receipt this Period **250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **525.00**  
**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 68 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. JAMES H. HAMMER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4630

City State Zip Code  
BALTIMORE MD 21212

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2014  
**Transaction ID : SA11AI.265607**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 19775 TANGLEWOOD

City State Zip Code  
BIG RAPIDS MI 49307

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2014  
**Transaction ID : SA11AI.260085**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 6020 GARDENGATE

City State Zip Code  
PLANO TX 75024

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

Name of Employer Occupation  
BARFLY SYNDICATE ENTREPRENEUR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2014  
**Transaction ID : SA11AI.270131**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2350.00

**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 69 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. RICHARD HARPER**

Mailing Address 176 RAINBOW DR

City State Zip Code  
LIVINGSTON TX 77399

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.270054**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 11405 FOSTER

City State Zip Code  
OVERLAND PARK KS 66210

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

Name of Employer Occupation  
HARRIS AND HART LLC ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.269542**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 11405 FOSTER

City State Zip Code  
OVERLAND PARK KS 66210

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

Name of Employer Occupation  
HARRIS AND HART LLC ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270170**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 70 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOYCE M HARRISON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 MIDLAND AVE

City BUDD LAKE	State NJ	Zip Code 07828
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2014

**Transaction ID : SA11AI.269983**

Amount of Each Receipt this Period  
50.00

**B. JOYCE M HARRISON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 MIDLAND AVE

City BUDD LAKE	State NJ	Zip Code 07828
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

**Transaction ID : SA11AI.270411**

Amount of Each Receipt this Period  
50.00

**C. MRS KEN HARWELL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4357 W 170TH ST N

City SKIATOOK	State OK	Zip Code 74070
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2014

**Transaction ID : SA11AI.264068**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 71 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address P. O BOX 220

City PAHOKEE State FL Zip Code 33476

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2016.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : SA11AI.260036**

Amount of Each Receipt this Period  
 2016.00

**B. MRS. HELEN J HAUSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 MEAD TER

City GLEN RIDGE State NJ Zip Code 07028

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267641**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 105 CLUSTER DR

City MINERAL WELLS State TX Zip Code 76067

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267286**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2716.00
<b>TOTAL</b> 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 72 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. NEALIE W HAYS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7539 COUNTY ROAD 372D

City HENDERSON	State TX	Zip Code 75654
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260217**

Amount of Each Receipt this Period  
 130.00

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

Mailing Address 409 SAN SEBASTIAN PL

City DENTON	State TX	Zip Code 76205
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262947**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1550 COUNTY ROAD 266

City GATESVILLE	State TX	Zip Code 76528
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.259979**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<b>TOTAL</b> 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 73 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HARRY HEATER**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 RIDGE RD

City SPRING CITY State PA Zip Code 19475

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 23 / 2014  
**Transaction ID : SA11AI.266466**

Amount of Each Receipt this Period  
200.00

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

Mailing Address PO BOX 20658

City JUNEAU State AK Zip Code 99802

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.266745**

Amount of Each Receipt this Period  
200.00

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

Mailing Address PO BOX 317

City ELEPHANT BUTTE State NM Zip Code 87935

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 13 / 2014  
**Transaction ID : SA11AI.273992**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 74 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DON HENDRICKS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 636

City DOLORES State CO Zip Code 81323

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262840**

Amount of Each Receipt this Period  
 140.00

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

Mailing Address 200 CRYSTAL SPRINGS CIR

City JOHNSON CITY State TN Zip Code 37615

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : SA11AI.266342**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 10423 LAKE RIDGE DR.

City OAKTON State VA Zip Code 22124

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2014  
**Transaction ID : SA11AI.268546**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00

**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 75 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DONNA HETLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 APRIL BREEZE ST

City MONTGOMERY State TX Zip Code 77356

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5250.00

Date of Receipt  
05 / 02 / 2014  
**Transaction ID : SA11AI.268444**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 122 APRIL BREEZE ST

City MONTGOMERY State TX Zip Code 77356

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5350.00

Date of Receipt  
05 / 14 / 2014  
**Transaction ID : SA11AI.269198**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 122 APRIL BREEZE ST

City MONTGOMERY State TX Zip Code 77356

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5450.00

Date of Receipt  
05 / 19 / 2014  
**Transaction ID : SA11AI.269481**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**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 76 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID HILKER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 877

City CIMARRON State KS Zip Code 67835

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.266668**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 26 NW 24TH ST

City DELRAY BEACH State FL Zip Code 33444

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 02 / 2014  
**Transaction ID : SA11AI.260378**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 45233 S FORK DR. APT. C

City THREE RIVERS State CA Zip Code 93271

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 05 / 2014  
**Transaction ID : SA11AI.260880**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 77 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HOWARD R. HILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 45233 S FORK DR. APT. C

City THREE RIVERS State CA Zip Code 93271

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 08 / 2014  
Transaction ID : SA11AI.262830

Amount of Each Receipt this Period  
100.00

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

Mailing Address 26 NW 24TH ST

City DELRAY BEACH State FL Zip Code 33444

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 19 / 2014  
Transaction ID : SA11AI.265897

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2016 WORTHINGTON LN.

City EDMOND State OK Zip Code 73013

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

Name of Employer Occupation  
ALFREDO'S OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3100.00

Date of Receipt  
05 / 27 / 2014  
Transaction ID : SA11AI.269797

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 78 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD HILLIKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5892 MAIN ST

City WILLIAMSVILLE State NY Zip Code 14221

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 05 / 2014  
Transaction ID : SA11AI.261167

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4421 E NORTH GLENNGRAE LN

City SPOKANE State WA Zip Code 99223

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
05 / 13 / 2014  
Transaction ID : SA11AI.273924

Amount of Each Receipt this Period  
150.00

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

Mailing Address 6724 BALMORAL TER

City CLARKSTON State MI Zip Code 48346

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 09 / 2014  
Transaction ID : SA11AI.263430

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 79 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ALAN L HOLMES**  
Full Name (Last, First, Middle Initial)

Mailing Address 14910 E 48TH ST

City KANSAS CITY State MO Zip Code 64136

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 16 / 2014  
**Transaction ID : SA11AI.265536**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 3000 W. 050 N.

City LAGRANGE State IN Zip Code 46761

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

Name of Employer SELF EMPLOYED Occupation DAIRY FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
05 / 09 / 2014  
**Transaction ID : SA11AI.263753**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 115 ARLETTE DR

City LAFAYETTE State LA Zip Code 70503

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 27 / 2014  
**Transaction ID : SA11AI.266656**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 80 OF 272 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address 620 BUERMANN AVE.

City TOMS RIVER	State NJ	Zip Code 08753
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2014

**Transaction ID : SA11AI.263407**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 620 BUERMANN AVE.

City TOMS RIVER	State NJ	Zip Code 08753
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2014

**Transaction ID : SA11AI.263408**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 5300 W 16TH AVE. APT. 209

City HIALEAH	State FL	Zip Code 33012
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267213**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> 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 81 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MS NAN S HSU</b>		Date of Receipt
Mailing Address CMR 457 BOX 802		M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2014
City	State	Zip Code
APO	AE	09033
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.262841
C		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		1000.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR JACK HUTCHENS</b>		Date of Receipt
Mailing Address 1224 CORNWALL AVE APT 906		M M M / D D D / Y Y Y Y Y Y 05 / 13 / 2014
City	State	Zip Code
BELLINGHAM	WA	98225
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.264927
C		Amount of Each Receipt this Period
		425.00
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		425.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR JACK HUTCHENS</b>		Date of Receipt
Mailing Address 1224 CORNWALL AVE APT 906		M M M / D D D / Y Y Y Y Y Y 05 / 27 / 2014
City	State	Zip Code
BELLINGHAM	WA	98225
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.266969
C		Amount of Each Receipt this Period
		800.00
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		1225.00
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2225.00
<b>TOTAL</b> 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 82 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. WILLIAM F IGOE**  
Full Name (Last, First, Middle Initial)

Mailing Address 476 MUNROE AVE

City SLEEPY HOLLOW State NY Zip Code 10591

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.261274**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 849 BROOKWOLD AVE

City NORTH BALDWIN State NY Zip Code 11510

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.266106**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 18356 MYRTLE CT. # 3

City LANSING State IL Zip Code 60438

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

Name of Employer MWRDGC Occupation LAB

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2014  
**Transaction ID : SA11AI.269269**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 83 OF 272
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. KATHLEEN JACKOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18356 MYRTLE CT. # 3  
 City LANSING State IL Zip Code 60438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MWRDGC Occupation LAB  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2014  
**Transaction ID : SA11AI.269660**  
 Amount of Each Receipt this Period  
 50.00

**B. KATHLEEN JACKOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18356 MYRTLE CT. # 3  
 City LANSING State IL Zip Code 60438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MWRDGC Occupation LAB  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270190**  
 Amount of Each Receipt this Period  
 50.00

**C. ROBERT JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 NE 2ND AVE APT 1101  
 City PORTLAND State OR Zip Code 97232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.269067**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 84 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. THOMAS JENNY**  
Full Name (Last, First, Middle Initial)

Mailing Address 406 GARDEN CLUB DR

City DELAND State FL Zip Code 32724

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2014  
**Transaction ID : SA11AI.269666**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO BOX 1144

City TROY State MT Zip Code 59935

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

Name of Employer CHLOR RID Occupation MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2014  
**Transaction ID : SA11AI.268607**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 837 S PARK TRAIL DR

City CARMEL State IN Zip Code 46032

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.273011**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 85 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JIM JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1144  
 City TROY State MT Zip Code 59935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHLOR RID Occupation MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269415**  
 Amount of Each Receipt this Period  
 50.00

**B. KENNETH P JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 59 CLARK AVE  
 City DRACUT State MA Zip Code 01826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267399**  
 Amount of Each Receipt this Period  
 105.00

**C. JIM JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1144  
 City TROY State MT Zip Code 59935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHLOR RID Occupation MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270139**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 255.00  
**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 86 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. JEAN JOHNSON**

Mailing Address 11501 WOODLAND POND PARKWAY

City State Zip Code  
CHESTERFIELD VA 23838

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : SA11AI.270618**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 16 HAWKVIEW ROAD

City State Zip Code  
HUDSON NH 03051

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270360**

Amount of Each Receipt this Period  
50.00

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

Mailing Address PO BOX 911

City State Zip Code  
SITKA AK 99835

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261745**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 87 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RALPH E JUNKER**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 911

City SITKA State AK Zip Code 99835

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : SA11AI.266620**

Amount of Each Receipt this Period  
**50.00**

**B. MRS MILDRED E KATZELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 56 MEDFORD LEAS

City MEDFORD State NJ Zip Code 08055

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : SA11AI.261292**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 3305 MATHIESON DR

City ATLANTA State GA Zip Code 30305

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

Name of Employer BANK OF AMERICA Occupation FINANCIAL ADVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2014**

**Transaction ID : SA11AI.268216**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **650.00**

**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 88 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. NANCY E KAYS**

Mailing Address 2231 N INDIAN HILL BLVD

City State Zip Code  
CLAREMONT CA 91711

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.264833**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6898 BELL CT

City State Zip Code  
REX GA 30273

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264529**

Amount of Each Receipt this Period  
700.00

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

Mailing Address 3112 SUMMIT CT

City State Zip Code  
LITTLE ROCK AR 72227

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.269732**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**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 89 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. GIDDENS KING**

Mailing Address 33 PARADISE LN

City State Zip Code  
TREASURE ISLAND FL 33706

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2014  
**Transaction ID : SA11AI.268549**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 33 PARADISE LN

City State Zip Code  
TREASURE ISLAND FL 33706

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.268943**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 21 WINONA DR

City State Zip Code  
LINDEN VA 22642

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.272441**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 90 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DONALD KIRCHNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1298 MISTYMEADOW LANE

City CINCINNATI State OH Zip Code 45230

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

Name of Employer P&G Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270345**

Amount of Each Receipt this Period  
 25.00

**B. MRS SHIRLEY A KLEIN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 213

City MAULDIN State SC Zip Code 29662

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261425**

Amount of Each Receipt this Period  
 250.00

**C. MR CHARLES E KNOFF JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 6680 SE HARBOR CIR

City STUART State FL Zip Code 34996

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

Name of Employer NONE Occupation RETIRED

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  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266752**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00

**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 91 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. LIV KNUDSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1408 GOLD CIR  
City ROCKLIN State CA Zip Code 95765  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2014  
**Transaction ID : SA11AI.265100**  
Amount of Each Receipt this Period  
150.00

**B. PETER G KOERTEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13517 AURORA DR APT 103  
City SAN LEANDRO State CA Zip Code 94577  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2014  
**Transaction ID : SA11AI.268560**  
Amount of Each Receipt this Period  
25.00

**C. PETER G KOERTEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13517 AURORA DR APT 103  
City SAN LEANDRO State CA Zip Code 94577  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2014  
**Transaction ID : SA11AI.260579**  
Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 195.00  
**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 92 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. PETER G KOERTEN**

Mailing Address 13517 AURORA DR APT 103

City State Zip Code  
SAN LEANDRO CA 94577

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.269178**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. MR CARL W. KOHLS**

Mailing Address 506 MEADOW RD

City State Zip Code  
SYRACUSE NY 13219

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260918**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11996 NW 2ND ST

City State Zip Code  
CORAL SPRINGS FL 33071

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264614**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 93 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD KORPAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 31483 MORNING STAR DR

City EVERGREEN State CO Zip Code 80439

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260525**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 26701 STATE HIGHWAY 16

City JERSEYVILLE State IL Zip Code 62052

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2014  
**Transaction ID : SA11AI.268585**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 3547 SIR WILFRED PL

City VIRGINIA BEACH State VA Zip Code 23452

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270274**

Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	790.00
<b>TOTAL</b> 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 94 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID W KRUEGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 316 N 46TH AVE

City YAKIMA State WA Zip Code 98908

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 23 / 2014  
Transaction ID : SA11AI.266530

Amount of Each Receipt this Period  
250.00

**B. MR CHARLES R KUBIC**  
Full Name (Last, First, Middle Initial)

Mailing Address 669 S ATLANTIC AVE

City VIRGINIA BEACH State VA Zip Code 23451

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
05 / 29 / 2014  
Transaction ID : SA11AI.267406

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1025 CROSSWINDS CV.

City COLLIERVILLE State TN Zip Code 38017

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
05 / 21 / 2014  
Transaction ID : SA11AI.266252

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 95 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DORIS P LACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 670748  
 City CHUGIAK State AK Zip Code 99567  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2014  
**Transaction ID : SA11AI.265666**  
 Amount of Each Receipt this Period  
 100.00

**B. MR BRIAN LANDIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2147 DOBBIN RD NW  
 City LEBO State KS Zip Code 66856  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.267072**  
 Amount of Each Receipt this Period  
 250.00

**C. GEORGE LANDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 301  
 City ALEXANDRIA State KY Zip Code 41001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DIVERSIFIED OPHTHALMICS, INC. OPTOMETRIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.264809**  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2850.00  
**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 96 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HERBERT D LANTINGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 7358 CASCADE RD SE

City GRAND RAPIDS	State MI	Zip Code 49546
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
05	/	12	/	2014

**Transaction ID : SA11AI.264399**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6261 E VISTA DEL CANON

City TUCSON	State AZ	Zip Code 85750
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
485.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267526**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 15142 14TH RD

City PLYMOUTH	State IN	Zip Code 46563
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

**Transaction ID : SA11AI.260465**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1275.00
<b>TOTAL</b> 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 97 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. SCOTT LAWRENCE**  
Full Name (Last, First, Middle Initial)

Mailing Address 6813 PATRICK LANE

City PLANO State TX Zip Code 75024

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

Name of Employer FAITHFUL & GOLD Occupation PROJECT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.269682**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 105 CHERRYWOOD DR

City NICHOLASVILLE State KY Zip Code 40356

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.273549**

Amount of Each Receipt this Period  
 150.00

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

Mailing Address 11463 MORGAN AVE

City PLYMOUTH State MI Zip Code 48170

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263173**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 98 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. SUELLEN LESLIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4061 CREEK RD  
 City Kitty Hawk    State NC    Zip Code 27949  
 Date of Receipt: 05 / 06 / 2014  
**Transaction ID : SA11AI.259977**  
 Amount of Each Receipt this Period: 5000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: INFORMATION REQUESTED    Occupation: INFORMATION REQUESTED  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date: 5000.00

**B. MR GEORGE E LEVASSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10002 NW 89TH AVE  
 City Medley    State FL    Zip Code 33178  
 Date of Receipt: 05 / 14 / 2014  
**Transaction ID : SA11AI.265071**  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: INFORMATION REQUESTED    Occupation: INFORMATION REQUESTED  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date: 500.00

**C. HERBERT ALAN LEVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 E GRINNELL DR  
 City Burbank    State CA    Zip Code 91501  
 Date of Receipt: 05 / 12 / 2014  
**Transaction ID : SA11AI.264745**  
 Amount of Each Receipt this Period: 75.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: DEPT OF JUSTICE OF THE STATE OF CA    Occupation: ATTORNEY  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date: 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5575.00  
**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 99 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MS GOGA M LISE**

Mailing Address 95-1089 PAEMOKU PL

City MILILANI State HI Zip Code 96789

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 21 / 2014**

**Transaction ID : SA11AI.266238**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 1905 EARLDALE CT

City ALEXANDRIA State VA Zip Code 22306

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11AI.267544**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 102 COLGATE AVE

City YONKERS State NY Zip Code 10703

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : SA11AI.269603**

Amount of Each Receipt this Period  
**75.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **625.00**

**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 100 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DAVID W LOVELAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 709 EAYRESTOWN RD

City LUMBERTON State NJ Zip Code 08048

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266642**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1219 HEATH HOLLOW DR

City SPRING State TX Zip Code 77379

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

Name of Employer RCL OFFSHORE ENGINEER, INC. Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : SA11AI.268291**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 202 DESERT LAKES DR

City RANCHO MIRAGE State CA Zip Code 92270

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260574**

Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 101 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. RICHARD LUSK**

Mailing Address 202 DESERT LAKES DR

City RANCHO MIRAGE State CA Zip Code 92270

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267126**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 9529 LAKE WASHINGTON BLVD NE

City BELLEVUE State WA Zip Code 98004

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : SA11AI.268253**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 820 W 14TH ST

City VINTON State IA Zip Code 52349

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266987**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 365.00

**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 102 OF 272  
(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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. JACK MAAS**

Mailing Address 5600 16TH ST. N.

City State Zip Code  
ARLINGTON VA 22205

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269450**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. M. A. MAEDGEN JR.**

Mailing Address P. O. BOX 87

City State Zip Code  
MATHIS TX 78368

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

Name of Employer Occupation  
SELF EMPLOYED AG

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.273906**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4358 S DEL REY AVE

City State Zip Code  
DEL REY CA 93616

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.273840**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

**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 103 OF 272
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MRS. JESSIE MARAGONI</b>		Date of Receipt
Mailing Address 4358 S DEL REY AVE		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
DEL REY	CA	93616
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.266057</b>
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR JOHN F MARSHALL</b>		Date of Receipt
Mailing Address 136 MOORINGS PARK DR # P502		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
NAPLES	FL	34105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.266769</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR JOHN F MARSHALL</b>		Date of Receipt
Mailing Address 136 MOORINGS PARK DR # P502		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
NAPLES	FL	34105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.270556</b>
Name of Employer INFORMATION REQUESTED		Amount of Each Receipt this Period
Occupation INFORMATION REQUESTED		<input type="text" value="195.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="495.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="445.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 104 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. DANIEL D MARTIN</b>			Date of Receipt
Mailing Address RR 3 BOX 115			<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.272858</b>
CARROLLTON	IL	62016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="130.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. DANIEL D MARTIN</b>			Date of Receipt
Mailing Address RR 3 BOX 115			<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.262680</b>
CARROLLTON	IL	62016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="515.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. LARRY R MARTIN</b>			Date of Receipt
Mailing Address 12829 SARATOGA SPRINGS CIR			<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.266024</b>
FORT WORTH	TX	76244	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5000.00"/>
Name of Employer	Occupation		
INFORMATION REQUESTED	INFORMATION REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5430.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

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

FOR LINE NUMBER: PAGE 105 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. MR PAUL MAURIALA**

Mailing Address 25431 LARCH ST NW

City State Zip Code  
ISANTI MN 55040

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.267082**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1809 HAWTHORN DR

City State Zip Code  
RICHMOND TX 77469

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : SA11AI.270492**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM J MCCARTHY**

Mailing Address 330 MONTGOMERY ST APT 105

City State Zip Code  
SYRACUSE NY 13202

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267665**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 106 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JEAN A. MCCARTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8815 WARM GRANITE DR.  
 City COLUMBIA State MD Zip Code 21045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269482**  
 Amount of Each Receipt this Period  
 100.00

**B. JAMES D. MCCULLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 935 WOODWINDS DR.  
 City COOKEVILLE State TN Zip Code 38501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.265999**  
 Amount of Each Receipt this Period  
 100.00

**C. CHARLOTTE MCGHEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3651 N KAREN CT.  
 City DECATUR State IL Zip Code 62526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260389**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> 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 107 OF 272
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. GEORGE MCKEE</b>		Date of Receipt
Mailing Address <b>PO BOX 5</b>		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>FAUNSDALE</b>	<b>AL</b>	<b>36738</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11Al.266787</b>
<b>C</b>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
<b>SELF EMPLOYED</b>	<b>FARMER</b>	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JILL MCLOUD</b>		Date of Receipt
Mailing Address <b>4478 S FARM ROAD 189</b>		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>ROGERSVILLE</b>	<b>MO</b>	<b>65742</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11Al.274506</b>
<b>C</b>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
<b>INFORMATION REQUESTED</b>	<b>INFORMATION REQUESTED</b>	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. VINCENT T MCMANUS</b>		Date of Receipt
Mailing Address <b>1 BLACKBERRY LN</b>		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>WALLINGFORD</b>	<b>CT</b>	<b>06492</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11Al.260901</b>
<b>C</b>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
<b>INFORMATION REQUESTED</b>	<b>INFORMATION REQUESTED</b>	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 108 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ERNEST MEKJIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5339 ORRVILLE AVE

City WOODLAND HILLS State CA Zip Code 91367

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2014  
**Transaction ID : SA11AI.265551**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 119 ADAMS CT

City KAMIAH State ID Zip Code 83536

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.262284**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address PO BOX 6248

City SILVER SPRING State MD Zip Code 20916

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

Name of Employer DEPARTMENT OF NAVY Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.268349**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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 109 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GARY W. MISSEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1003 CARDIFF LN  
 City State Zip Code  
 REDWOOD CITY CA 94061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262861**  
 Amount of Each Receipt this Period  
 100.00

**B. RICHARD H MOATS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2825 41ST WAY SE  
 City State Zip Code  
 OLYMPIA WA 98501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.265091**  
 Amount of Each Receipt this Period  
 100.00

**C. MR THOMAS MONTEITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 RARITAN RD APT 1B  
 City State Zip Code  
 CLARK NJ 07066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THE GREAT A&P TEA CO. STORE CLERK  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 312.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.264905**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**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 110 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOANN MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 544 ELLESMERE DR

City State Zip Code  
WALNUT CREEK CA 94598

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

Name of Employer Occupation  
TELECOMMUNICATIONS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 08 / 2014  
**Transaction ID : SA11AI.268913**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 544 ELLESMERE DR

City State Zip Code  
WALNUT CREEK CA 94598

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

Name of Employer Occupation  
TELECOMMUNICATIONS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 20 / 2014  
**Transaction ID : SA11AI.269536**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 544 ELLESMERE DR

City State Zip Code  
WALNUT CREEK CA 94598

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

Name of Employer Occupation  
TELECOMMUNICATIONS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.269998**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 111 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. BILL J MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 21202 CUPAR LN

City HUNTINGTON BEACH State CA Zip Code 92646

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

Name of Employer CITY OF HUNTINGTON BEACH Occupation COMMUNICATIONS OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261817**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 21202 CUPAR LN

City HUNTINGTON BEACH State CA Zip Code 92646

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

Name of Employer CITY OF HUNTINGTON BEACH Occupation COMMUNICATIONS OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.265093**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 1440 JACKS CANYON RD

City SEDONA State AZ Zip Code 86351

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : SA11AI.266445**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 112 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. BILL J MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 21202 CUPAR LN

City HUNTINGTON BEACH State CA Zip Code 92646

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

Name of Employer CITY OF HUNTINGTON BEACH Occupation COMMUNICATIONS OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : SA11AI.266500**

Amount of Each Receipt this Period  
 50.00

**B. MRS. CAROL A MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1122 SLEEPY HOLLOW LN

City EAST JORDAN State MI Zip Code 49727

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267116**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 5460 STRAIGHT RD

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267284**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 113 OF 272
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES MULLISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 147 GLEN ESTE BLVD  
 City HAINES CITY State FL Zip Code 33844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261453**  
 Amount of Each Receipt this Period  
 50.00

**B. MARTIN MUNROE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9630 WOODLAND RD  
 City NEW MARKET State MD Zip Code 21774  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260691**  
 Amount of Each Receipt this Period  
 100.00

**C. BRIDGET M MURRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 LENBAR CIR  
 City NEW CITY State NY Zip Code 10956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263202**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 114 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. BRIDGET M MURRAY</b>		Date of Receipt
Mailing Address 9 LENBAR CIR		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City NEW CITY	State NY	Zip Code 10956
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.266851</b>
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR MIKE NEVELSON</b>		Date of Receipt
Mailing Address PO BOX 249		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City ACWORTH	State NH	Zip Code 03601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.267571</b>
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. FRANK NICHOLS</b>		Date of Receipt
Mailing Address 5308 CITRUS COLONY RD		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City LOOMIS	State CA	Zip Code 95650
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.267423</b>
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 115 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ERNEST NICOLAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 29875 BRADMOOR CT

City FARMINGTON State MI Zip Code 48334

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.273015**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1908 PIN OAK DR

City YORK State PA Zip Code 17402

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.273267**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 12899 AVENUE 336

City VISALIA State CA Zip Code 93292

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.273093**

Amount of Each Receipt this Period  
 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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 116 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR MICHAEL A O' BRIEN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2

City HYATTVILLE State WY Zip Code 82428

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266714**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 375 BULLARD AVE. STE. 1

City CLOVIS State CA Zip Code 93612

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

Name of Employer SELF EMPLOYED Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267192**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 350 W BIRDIE DR

City PUEBLO State CO Zip Code 81007

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260725**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 117 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ROGER D PAGE**

Mailing Address 350 W BIRDIE DR

City PUEBLO State CO Zip Code 81007

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266617**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 2340 NORDIC WAY

City TURLOCK State CA Zip Code 95382

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.264017**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 4808 S. ARDEN AVE.

City SIOUX FALLS State SD Zip Code 57103

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264695**

Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 295.00

**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 118 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MACK PARTEE</b>		Date of Receipt
Mailing Address PO BOX 678		<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
HELOTES	TX	78023
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.262985</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. IRENE PEDERSON</b>		Date of Receipt
Mailing Address 200 SUNNYSIDE AVE		<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
PLENTYWOOD	MT	59254
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.265229</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>C. JAMES J PIEH</b>		Date of Receipt
Mailing Address 133 WASHINGTON ST		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORTH EASTON	MA	02356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.267133</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 119 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. PETER PIERCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 269 HILLDALE RD  
 City VILLANOVA State PA Zip Code 19085  
 Date of Receipt 05 / 13 / 2014  
 Transaction ID : SA11AI.273795  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**B. MRS GENEVA PINELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1345 HERMOSA WAY  
 City COLORADO SPRINGS State CO Zip Code 80906  
 Date of Receipt 05 / 16 / 2014  
 Transaction ID : SA11AI.265602  
 Amount of Each Receipt this Period 60.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

**C. MR WINFIELD W PIPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 PROSPECT AVE  
 City DOWNINGTOWN State PA Zip Code 19335  
 Date of Receipt 05 / 02 / 2014  
 Transaction ID : SA11AI.260228  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00  
**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 120 OF 272
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. SCOTT PITTS**

Mailing Address 1210 BROAD ST APT 6

City State Zip Code  
WHITEHALL PA 18052

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2014  
**Transaction ID : SA11AI.273165**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 2170

City State Zip Code  
YUCCA VALLEY CA 92286

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1700.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2014  
**Transaction ID : SA11AI.260569**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 45 MILITIA HILL ROAD

City State Zip Code  
WARRINGTON PA 18976

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2014  
**Transaction ID : SA11AI.269131**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 121 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ROBERT POWELL**

Mailing Address 13200 MACCARTEE LN.

City State Zip Code  
SILVERHILL AL 36576

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2014  
**Transaction ID : SA11AI.268847**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 604 GREYBULL AVE

City State Zip Code  
GREYBULL WY 82426

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

Name of Employer Occupation  
SELF EMPLOYED TAX PREPARATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2014  
**Transaction ID : SA11AI.275591**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 21612 VILLA MARIA CT

City State Zip Code  
CUPERTINO CA 95014

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

Name of Employer Occupation  
DENTIST SELF EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.262590**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

**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 122 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. PAULA PULLINS**

Mailing Address 9381 SNAPPTOWN RD

City State Zip Code  
QUINCY OH 43343

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.273763**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 5015 MEADOW WOOD DR

City State Zip Code  
WACO TX 76710

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266691**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 10279 VERANDA WOODS CV

City State Zip Code  
ARLINGTON TN 38002

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

Name of Employer Occupation  
US GOVERNMENT NAVY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263613**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 123 OF 272
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HOWARD RANSOM**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12919 SANDRI LN.  
City HOUSTON State TX Zip Code 77077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TWTELECOM Occupation TECHNICIAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2014  
**Transaction ID : SA11AI.268899**  
Amount of Each Receipt this Period  
25.00

**B. HOWARD RANSOM**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12919 SANDRI LN.  
City HOUSTON State TX Zip Code 77077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TWTELECOM Occupation TECHNICIAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2014  
**Transaction ID : SA11AI.269252**  
Amount of Each Receipt this Period  
25.00

**C. HOWARD RANSOM**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12919 SANDRI LN.  
City HOUSTON State TX Zip Code 77077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TWTELECOM Occupation TECHNICIAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2014  
**Transaction ID : SA11AI.269806**  
Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 124 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. HOWARD RANSOM</b>		Date of Receipt
Mailing Address 12919 SANDRI LN.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOUSTON	TX	77077
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.270416</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
TWTELECOM	TECHNICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR JAMES M RAPKOCH</b>		Date of Receipt
Mailing Address 6250 GARLOCK WAY		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
COLORADO SPRINGS	CO	80918
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.260847</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. FLOYD RAWLINGS</b>		Date of Receipt
Mailing Address 5010 COUNTY ROAD 63		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROSHARON	TX	77583
FEC ID number of contributing federal political committee.		<b>Transaction ID : SA11AI.275201</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	TECHNICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="575.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 125 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. SHIRLEY A REIDER</b>		Date of Receipt
Mailing Address PO BOX 419		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
POTRERO	CA	91963
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.267244</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR JAMES A REMINGTON</b>		Date of Receipt
Mailing Address 2300 CEDARFIELD PKWY APT 263		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
RICHMOND	VA	23233
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.267118</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="1200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1800.00"/>	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B RICE</b>		Date of Receipt
Mailing Address 600 FARRELL DR APT 218		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
COVINGTON	KY	41011
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.264387</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 126 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. PAUL RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1221 W. PLEASANT ST.  
 City AVON PARK State FL Zip Code 33825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270136**  
 Amount of Each Receipt this Period  
 100.00

**B. MONTE RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 HIGHBRIDGE XING APT 3301  
 City ASHEVILLE State NC Zip Code 28803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260209**  
 Amount of Each Receipt this Period  
 200.00

**C. PHILIP E RITCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 KALUAMOO ST  
 City KAILUA State HI Zip Code 96734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267711**  
 Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00  
**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 127 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR WARREN M ROBBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10234 E SPRING CREEK RD  
 City State Zip Code  
 SUN LAKES AZ 85248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263061**  
 Amount of Each Receipt this Period  
 100.00

**B. MR WARREN M ROBBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10234 E SPRING CREEK RD  
 City State Zip Code  
 SUN LAKES AZ 85248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264268**  
 Amount of Each Receipt this Period  
 100.00

**C. MR WARREN M ROBBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10234 E SPRING CREEK RD  
 City State Zip Code  
 SUN LAKES AZ 85248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 445.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.265972**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**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 128 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES M ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 274 BONNIE LN

City GRANTS PASS State OR Zip Code 97527

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2014  
**Transaction ID : SA11AI.263678**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 801 ALABAMA ST.

City LAKE ARTHUR State NM Zip Code 88253

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.262826**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 617 MEANDER LN

City CANTONMENT State FL Zip Code 32533

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2014  
**Transaction ID : SA11AI.264396**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

**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 129 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. VERNE A ROBINSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 W WHIDBEY AVE APT 46

City OAK HARBOR	State WA	Zip Code 98277
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

**Transaction ID : SA11AI.266719**

Amount of Each Receipt this Period  
50.00

**B. COL ELLIETSON D ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 WINDSOR WYND PL

City FUQUAY VARINA	State NC	Zip Code 27526
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

**Transaction ID : SA11AI.267745**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 204 WESTWOOD DR

City EULESS	State TX	Zip Code 76039
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2014

**Transaction ID : SA11AI.270498**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> 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 130 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address 1177 OLD FORT DR

City TALLAHASSEE State FL Zip Code 32301

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267117**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 8052 W 850 S

City COLUMBUS State IN Zip Code 47201

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267509**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.275417**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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 131 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RUDY ROTTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2759 E 213TH ST

City LYNDON State KS Zip Code 66451

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : SA11AI.266431**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 13223 E L AND J TOWNLINE RD

City WHITEWATER State WI Zip Code 53190

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

Name of Employer SELF EMPLOYED Occupation DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.264233**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 182 W GLENGATE AVE

City CHICAGO HEIGHTS State IL Zip Code 60411

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262917**

Amount of Each Receipt this Period  
 325.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	575.00
<b>TOTAL</b> 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 132 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MARGARET RUSSELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 8455 KEYSTONE XING

City INDIANAPOLIS State IN Zip Code 46240

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
05 / 01 / 2014  
**Transaction ID : SA11AI.260163**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 217 8TH AVE APT 102

City SAN MATEO State CA Zip Code 94401

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 08 / 2014  
**Transaction ID : SA11AI.262747**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 49145 HIGHWAY 445

City LORANGER State LA Zip Code 70446

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
05 / 07 / 2014  
**Transaction ID : SA11AI.261975**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2625.00
<b>TOTAL</b> 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 133 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. TODD SANDERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5001 COUNTY ROAD 81 N

City FARGO	State ND	Zip Code 58102
---------------	-------------	-------------------

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

Name of Employer SANDERS METAL PRODUCT	Occupation PRESIDENT
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

**Transaction ID : SA11AI.273322**

Amount of Each Receipt this Period  

150.00
--------

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

Mailing Address 23364 WATER CIR

City BOCA RATON	State FL	Zip Code 33486
--------------------	-------------	-------------------

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

Name of Employer SRA	Occupation COMPUTER CONSULTANT
-------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  

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

**Transaction ID : SA11AI.268332**

Amount of Each Receipt this Period  

300.00
--------

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

Mailing Address PO BOX 292

City PARADISE	State UT	Zip Code 84328
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2014

**Transaction ID : SA11AI.266164**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<b>TOTAL</b> 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 134 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. RICHARD SCHAEFER**  
Full Name (Last, First, Middle Initial)

Mailing Address 701 S SEMINARY AVE

City State Zip Code  
PARK RIDGE IL 60068

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
05 / 07 / 2014  
Transaction ID : SA11AI.262360

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1313 APPALOOSA RD

City State Zip Code  
BOULDER CITY NV 89005

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
502.00

Date of Receipt  
05 / 14 / 2014  
Transaction ID : SA11AI.265062

Amount of Each Receipt this Period  
500.00

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

Mailing Address 16282 ROAD 20

City State Zip Code  
FORT JENNINGS OH 45844

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
05 / 13 / 2014  
Transaction ID : SA11AI.273873

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 135 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RAYMOND G SCHMIDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1112 NW DEARBORN AVE  
 City LAWTON State OK Zip Code 73507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.262732**  
 Amount of Each Receipt this Period  
 75.00

**B. RONALD SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7472 S 82ND ST  
 City FRANKLIN State WI Zip Code 53132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.272756**  
 Amount of Each Receipt this Period  
 100.00

**C. ELMER SCHOENHALS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13850 COUNTY ROAD L  
 City PERRYTON State TX Zip Code 79070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264599**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 675.00  
**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 136 OF 272
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RICHARD V SCHRAMM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1900 WITHNELL AVE

City SAINT LOUIS State MO Zip Code 63118

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

Name of Employer SCHRAMM CARPET CLEANING, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.259978**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 15830 GOODES BRIDGE RD

City AMELIA COURT HOUSE State VA Zip Code 23002

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.262445**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 126 LANGDON ST

City NEWTON State MA Zip Code 02458

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2014  
**Transaction ID : SA11AI.273074**

Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> 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 137 OF 272
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN E SHILLINGBURG**  
Full Name (Last, First, Middle Initial)

Mailing Address 4800 FILLMORE AVE APT 603

City ALEXANDRIA	State VA	Zip Code 22311
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267161**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2290 D ST

City HAYWARD	State CA	Zip Code 94541
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.273176**

Amount of Each Receipt this Period  
 150.00

**C. DR. J PAUL SHIVELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 306 VISTA DRIVE

City YOUNTVILLE	State CA	Zip Code 94599
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263286**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 138 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DR. J PAUL SHIVELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 306 VISTA DRIVE

City YOUNTVILLE	State CA	Zip Code 94599
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.265025**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 12308 CHILDRESS ST

City BAKERSFIELD	State CA	Zip Code 93312
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation CHIROPRACTOR
-----------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263531**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2534 PARK PLACE DR

City FREMONT	State NE	Zip Code 68025
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.273718**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> 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 139 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. BEN SKINNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1530 BAYSHORE BLVD

City DUNEDIN State FL Zip Code 34698

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 28 / 2014  
**Transaction ID : SA11AI.267061**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 904 E SAVIDGE ST

City SPRING LAKE State MI Zip Code 49456

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 08 / 2014  
**Transaction ID : SA11AI.262863**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 1200 E AXTON RD

City BELLINGHAM State WA Zip Code 98226

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
05 / 16 / 2014  
**Transaction ID : SA11AI.265660**

Amount of Each Receipt this Period  
70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**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 140 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. BETTY M. SMITH**

Mailing Address 1101 SMITHLAND BND.

City ANDERSON	State SC	Zip Code 29621
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

**Transaction ID : SA11AI.266849**

Amount of Each Receipt this Period  

100.00
--------

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

Mailing Address 6109 STONEHAVEN DR

City NASHVILLE	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2014

**Transaction ID : SA11AI.270566**

Amount of Each Receipt this Period  

75.00
-------

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

Mailing Address 11212 W KAREN AVE

City HOUSTON	State AK	Zip Code 99623
-----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267215**

Amount of Each Receipt this Period  

300.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>475.00</b>
<b>TOTAL</b> 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 141 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. THOMAS R SNELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5131 BRANDILES LN

City WINSTON SALEM State NC Zip Code 27104

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : SA11AI.266026**

Amount of Each Receipt this Period  
 250.00

**B. MR ROBERT M SOMMER**  
Full Name (Last, First, Middle Initial)

Mailing Address W260N9311 STATE ROAD 164

City COLGATE State WI Zip Code 53017

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11AI.264764**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 3531 W. SPRINGFIELD DR.

City FLORENCE State SC Zip Code 29501

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

Name of Employer SELF EMPLOYED Occupation FURNITURE RESTORATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2014

**Transaction ID : SA11AI.268586**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

**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 142 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CHARLES STARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3531 W. SPRINGFIELD DR.

City FLORENCE State SC Zip Code 29501

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

Name of Employer SELF EMPLOYED Occupation FURNITURE RESTORATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : SA11AI.268988**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 3531 W. SPRINGFIELD DR.

City FLORENCE State SC Zip Code 29501

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

Name of Employer SELF EMPLOYED Occupation FURNITURE RESTORATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : SA11AI.269231**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 3423 WHITE OAK STREET

City HIGHLANDS RANCH State CO Zip Code 80129

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

Name of Employer MSU DENVER Occupation FISCAL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : SA11AI.270188**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.00**

**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 143 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JAMES STENERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4544 4 ST. SO.

City MOORHEAD State MN Zip Code 56560

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2014  
**Transaction ID : SA11AI.269351**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 12010 KUYKENDAHL RD APT 308

City HOUSTON State TX Zip Code 77067

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

Name of Employer SELF EMPLOYED Occupation GAS WELLS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269428**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 18680 HAZEL AVE

City ROCK PORT State MO Zip Code 64482

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : SA11AI.269923**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 144 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. DEAN STEVINSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7979 S EUDORA CIR  
City CENTENNIAL State CO Zip Code 80122  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014  
**Transaction ID : SA11AI.259980**  
Amount of Each Receipt this Period  
250.00

**B. MR. TROY STEWART**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2194 COURT AVE  
City BAKER CITY State OR Zip Code 97814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BOUE MOUNTAIN DENTURE CENTER Occupation DENTURIST  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.273201**  
Amount of Each Receipt this Period  
65.00

**C. RUTH STEYN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3356 WHIPPOORWILL LN.  
City OXFORD State MS Zip Code 38655  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 16 / 2014  
**Transaction ID : SA11AI.269342**  
Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> 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 145 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. EDWARD STILES</b>		Date of Receipt
Mailing Address 3168 ROXBURG DR		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
LEXINGTON	KY	40503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.264597</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. THOMAS STIPULKOSKY</b>		Date of Receipt
Mailing Address 29116 LARO DR		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
AGOURA HILLS	CA	91301
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.262411</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. JOHN R. STONE</b>		Date of Receipt
Mailing Address 19608 SE 21ST ST.		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAMMAMISH	WA	98075
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.261267</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED	INFORMATION REQUESTED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="700.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 146 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. SHARON STONER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6937 LENWOOD WAY

City SAN JOSE State CA Zip Code 95120

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 03 / 2014  
**Transaction ID : SA11AI.268594**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 20 N CARRIAGE DR

City SAINT JOSEPH State MO Zip Code 64506

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
05 / 05 / 2014  
**Transaction ID : SA11AI.260686**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 20 N CARRIAGE DR

City SAINT JOSEPH State MO Zip Code 64506

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
05 / 16 / 2014  
**Transaction ID : SA11AI.265561**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00

**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 147 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR JOHN E STOWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 GOLD FINCH LN  
 City State Zip Code  
 VONORE TN 37885  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : SA11AI.266453**  
 Amount of Each Receipt this Period  
 375.00

**B. MR. ROBERT A SUOMALA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 W CAMINO VELASQUEZ  
 City State Zip Code  
 GREEN VALLEY AZ 85622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267637**  
 Amount of Each Receipt this Period  
 225.00

**C. MR JOHN SUTTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address RR 5 BOX 2010  
 City State Zip Code  
 HEMPHILL TX 75948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.262258**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 148 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MS CAROLYN N SWEAZY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 357 EASTVIEW DR  
 City SHEPHERDSVILLE State KY Zip Code 40165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261487**  
 Amount of Each Receipt this Period  
 120.00

**B. EDDINA SYMNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 N ROOSEVELT ST  
 City HUTCHINSON State KS Zip Code 67501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263932**  
 Amount of Each Receipt this Period  
 350.00

**C. GEORGE M TAFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 875485  
 City WASILLA State AK Zip Code 99687  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267651**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	570.00
<b>TOTAL</b> 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 149 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. TEA PARTY PATRIOTS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1025 ROSE CREEK DRIVE  
STE. 620-322  
City WOODSTOCK State GA Zip Code 30189  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
300000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 20 / 2014  
**Transaction ID : SA11AI.259815**  
Amount of Each Receipt this Period  
300000.00

**B. GARY TEEGARDIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2323 BRENT DRIVE  
City DODGE CITY State KS Zip Code 67801  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
SEPC ELECTRICIAN  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 03 / 2014  
**Transaction ID : SA11AI.268593**  
Amount of Each Receipt this Period  
25.00

**C. GARY TEEGARDIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2323 BRENT DRIVE  
City DODGE CITY State KS Zip Code 67801  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
SEPC ELECTRICIAN  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 08 / 2014  
**Transaction ID : SA11AI.268994**  
Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300035.00
<b>TOTAL</b> 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 150 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. GARY TEEGARDIN</b>		Date of Receipt
Mailing Address 2323 BRENT DRIVE		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.269363</b>
DODGE CITY	KS	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.00"/>
Name of Employer	Occupation	
SEPC	ELECTRICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. GARY TEEGARDIN</b>		Date of Receipt
Mailing Address 2323 BRENT DRIVE		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.269601</b>
DODGE CITY	KS	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.00"/>
Name of Employer	Occupation	
SEPC	ELECTRICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. GARY TEEGARDIN</b>		Date of Receipt
Mailing Address 2323 BRENT DRIVE		<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : SA11AI.269974</b>
DODGE CITY	KS	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.00"/>
Name of Employer	Occupation	
SEPC	ELECTRICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="245.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 151 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. GEORGE TERLIZZI**  
Full Name (Last, First, Middle Initial)

Mailing Address 509 HINTON RD

City SHADY SPRING State WV Zip Code 25918

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
05 / 09 / 2014  
**Transaction ID : SA11AI.263973**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 7797 N JOHN YOUNG RD

City UNIONVILLE State IN Zip Code 47468

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.267317**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 5035 PHILIPSBURG BIGLER HWY

City WEST DECATUR State PA Zip Code 16878

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 02 / 2014  
**Transaction ID : SA11AI.260361**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 250.00

**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 152 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. RANDY THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 681328

City FRANKLIN State TN Zip Code 37068

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
05 / 02 / 2014  
Transaction ID : SA11AI.260494

Amount of Each Receipt this Period  
75.00

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

Mailing Address 326 HAILEY RD.

City MARLTON State NJ Zip Code 08053

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 27 / 2014  
Transaction ID : SA11AI.266616

Amount of Each Receipt this Period  
200.00

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

Mailing Address 4463 RAINBOW VISTA DR

City FALLBROOK State CA Zip Code 92028

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
05 / 08 / 2014  
Transaction ID : SA11AI.263008

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 153 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. HEATH TICKLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 118 PLANTATION RD

City HOUSTON State TX Zip Code 77024

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2014  
**Transaction ID : SA11AI.273761**

Amount of Each Receipt this Period  
 525.00

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

Mailing Address 25 STEEPLECHASE DR

City NEWINGTON State CT Zip Code 06111

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.267666**

Amount of Each Receipt this Period  
 30.00

**C. MR. EMMETT L. TINER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7028 BATTLE CREEK RD.

City FORT WORTH State TX Zip Code 76116

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266823**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	855.00
<b>TOTAL</b> 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 154 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. ELIZABETH TOULON**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 666

City KOLOA State HI Zip Code 96756

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11AI.267137**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2951 CAMINO DE LAS PIEDRAS

City EL CAJON State CA Zip Code 92019

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : SA11AI.275077**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 212 N. ELM ST.

City WELLINGTON State KS Zip Code 67152

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : SA11AI.263281**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

**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 155 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR. ALBERT G URBINA**  
Full Name (Last, First, Middle Initial)

Mailing Address 17238 BOCA CLUB BLVD APT 103

City BOCA RATON	State FL	Zip Code 33487
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2014

**Transaction ID : SA11AI.266775**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 10556 W LA PORTE RD

City MOKENA	State IL	Zip Code 60448
----------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267412**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 26014 MISTY WAY

City TEGA CAY	State SC	Zip Code 29708
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation DIRECTOR
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

**Transaction ID : SA11AI.268481**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> 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 156 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. MR DAVID VESS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6494

City FORT WORTH State TX Zip Code 76115

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

Name of Employer QUALITY CAST METALS INC. Occupation GENERAL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267492**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 20 BATES RD

City MORGANTOWN State WV Zip Code 26505

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266944**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 9735 BAY COLONY DR

City RIVERVIEW State FL Zip Code 33578

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2014  
**Transaction ID : SA11AI.260316**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 157 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. NORMAN WALDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1331 BELLEVUE ST LOT 47

City GREEN BAY	State WI	Zip Code 54302
-------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

**Transaction ID : SA11AI.267577**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6917 BAL LAKE DR

City FORT WORTH	State TX	Zip Code 76116
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

**Transaction ID : SA11AI.262612**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 6917 BAL LAKE DR

City FORT WORTH	State TX	Zip Code 76116
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2014

**Transaction ID : SA11AI.265988**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> 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 158 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

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

Mailing Address 3730 RAMSEY DR

City MARIETTA State GA Zip Code 30062

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2014  
**Transaction ID : SA11AI.261649**

Amount of Each Receipt this Period  
 325.00

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

Mailing Address 18981 CEDAR MILL CT

City SOUTH BEND State IN Zip Code 46637

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.273464**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 2418 W HOUSTON AVE

City SPOKANE State WA Zip Code 99208

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

Name of Employer CORRECTLONAL OFFICER Occupation WASHINGTON DEPT. OF CORRECTLONAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : SA11AI.263720**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00

**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 159 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. JAMES WEAKLEY**

Mailing Address 184 STONELEIGH AVE

City State Zip Code  
CARMEL NY 10512

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2014  
**Transaction ID : SA11AI.273273**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 37307 DIAMOND OAKS DR.

City State Zip Code  
MAGNOLIA TX 77355

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270301**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MS CHERYL L WEBSTER**

Mailing Address 3485 HAAS DR

City State Zip Code  
APTOS CA 95003

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

Name of Employer Occupation  
NORIN PRODUCTS, INC. VP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.274586**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

**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 160 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. JOHN WEIR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2N190 HARLEY RD

City CAMPTON HILLS State IL Zip Code 60119

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : SA11AI.269626**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 27346 VISTA AZUL

City CAPO BEACH State CA Zip Code 92624

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : SA11AI.268257**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1414 S 1050 E

City OAKLAND CITY State IN Zip Code 47660

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : SA11AI.265967**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 161 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. CLINT WHITTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2108 SPICEBERRY LN

City MESQUITE State TX Zip Code 75149

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
05 / 07 / 2014  
**Transaction ID : SA11AI.262144**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 2108 SPICEBERRY LN

City MESQUITE State TX Zip Code 75149

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
05 / 29 / 2014  
**Transaction ID : SA11AI.267481**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 616 PLYMOUTH ST

City BUCYRUS State OH Zip Code 44820

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 04 / 2014  
**Transaction ID : SA11AI.268651**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> 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 162 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. WALTER WILD**

Mailing Address 41-473 KALANIANAOLE HWY.

City State Zip Code  
WAIMANALO HI 96795

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2014  
**Transaction ID : SA11AI.270244**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3284 CANDLELIGHT TRL

City State Zip Code  
MARION IN 46952

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2014  
**Transaction ID : SA11AI.266612**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 757

City State Zip Code  
UTOPIA TX 78884

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2014  
**Transaction ID : SA11AI.264516**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 260.00

**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 163 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. K. DEAN WILLIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 107 WILLIAMS AND BROAD DRIVE

City BROWNSBORO	State AL	Zip Code 35741
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 10 / 2014  
**Transaction ID : SA11AI.269018**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2197 SUTTER VIEW LN.

City LINCOLN	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2014  
**Transaction ID : SA11AI.268632**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2197 SUTTER VIEW LN.

City LINCOLN	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6075.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : SA11AI.269452**

Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 164 OF 272
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ANDREW M WISE**

Mailing Address 1022 MICHIGAN ST

City PORT HURON State MI Zip Code 48060

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.260615**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. MRS. ESTER H WOOD**

Mailing Address 2485 TOWNLEY LN

City NORTH GARDEN State VA Zip Code 22959

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : SA11AI.267315**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1616 DANDRIDGE ST SW

City DECATUR State AL Zip Code 35601

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2014  
**Transaction ID : SA11AI.261108**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00

**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 165 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MS DIANE WOODARD</b>		Date of Receipt
Mailing Address 1616 DANDRIDGE ST SW		<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
DECATUR	AL	35601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.269483</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="235.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS DIANE WOODARD</b>		Date of Receipt
Mailing Address 1616 DANDRIDGE ST SW		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
DECATUR	AL	35601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.266104</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="285.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS DIANE WOODARD</b>		Date of Receipt
Mailing Address 1616 DANDRIDGE ST SW		<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
DECATUR	AL	35601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.269941</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="295.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 166 OF 272
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial) <b>A. MICHAELON WRIGHT</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2014 <b>Transaction ID : SA11AI.270198</b>
Mailing Address 201 W. BIG BEAVER RD. STE. 1420		Amount of Each Receipt this Period 250.00
City TROY	State MI	Zip Code 48084
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN W. WYMER</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 <b>Transaction ID : SA11AI.266462</b>
Mailing Address 1040 N. LAKE SHORE DR.		Amount of Each Receipt this Period 1000.00
City CHICAGO	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MARK A YEOMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2014 <b>Transaction ID : SA11AI.263326</b>
Mailing Address 219 HERITAGE OAKS LN		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> 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 167 OF 272
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)  
**A. ARTHUR K ZELLMER**

Mailing Address **PO BOX 325**

City **DAVENPORT** State **WA** Zip Code **99122**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**05 / 09 / 2014**  
**Transaction ID : SA11AI.263142**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **57 CLEVELAND AVE**

City **TONAWANDA** State **NY** Zip Code **14150**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  
**05 / 12 / 2014**  
**Transaction ID : SA11AI.273698**

Amount of Each Receipt this Period  
**130.00**

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

Mailing Address **16187 ROODS RD**

City **NEWARK** State **IL** Zip Code **60541**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**05 / 07 / 2014**  
**Transaction ID : SA11AI.262191**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>330.00</b>
<b>TOTAL</b> 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 168 OF 272  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

**A. STEWART A ZUBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 706 E 20TH ST  
 City CHEYENNE State WY Zip Code 82001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014  
**Transaction ID : SA11AI.265295**  
 Amount of Each Receipt this Period  
 50.00

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	428353.50



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-GOHMERT-CREATIVE FEES

001

Candidate Name

Category/  
Type

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  
05 / 13 / 2014

Transaction ID : SB21B.255662

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BEVIN-COPY WRITING

001

Candidate Name

Category/  
Type

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  
05 / 13 / 2014

Transaction ID : SB21B.255644

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-SASSE-E-MARKETING

001

Candidate Name

Category/  
Type

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  
05 / 13 / 2014

Transaction ID : SB21B.255669

Amount of Each Disbursement this Period

1394.00

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

2144.00

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCDANIEL-COPY WRITING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255651

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCDANIEL-COPY WRITING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255658

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-SHANNON-CREATIVE FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255638

Amount of Each Disbursement this Period

500.00

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

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

1250.00

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-AMASH-CREATIVE FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255665

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255647

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC E-MARKETING/COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255672

Amount of Each Disbursement this Period

12113.75

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

12863.75

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-KING-CREATIVE FEE

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255654

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255661

Amount of Each Disbursement this Period

333.33

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-LYNCH-CREATIVE FEE

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255643

Amount of Each Disbursement this Period

500.00

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

1333.33

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-AMASH-WEB CONTENT

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.255668**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BEVIN-COPY WRITING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.255650**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.255657**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MEADOWS-CREATIVE FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255664

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCDANIEL-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255646

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-E-MARKETING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255671

Amount of Each Disbursement this Period

1394.00

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

2144.00

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-KING-WEB CONTENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255653

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCDANIEL-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255660

Amount of Each Disbursement this Period

333.34

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCCLINTOCK-CREATIVE FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255642

Amount of Each Disbursement this Period

500.00

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

933.34

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-SCOTT-CREATIVE FEES

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255667

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-SASSE-COPY WRITING

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255649

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-CLAWSON-COPY WRITING

001

Candidate Name

Category/  
Type

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 / 13 / 2014

Transaction ID : SB21B.255656

Amount of Each Disbursement this Period

1000.00

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

1750.00

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



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-GOHMERT-WEB CONTENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	4

Transaction ID : SB21B.255663

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BIRMAN-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	4

Transaction ID : SB21B.255645

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCDANIEL-E-MARKETING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	4

Transaction ID : SB21B.255670

Amount of Each Disbursement this Period

1	3	9	4	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

1	7	4	4	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

1	7	4	4	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255652

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BEVIN-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255659

Amount of Each Disbursement this Period

333.33

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-MCCLINTOCK-WEB CONTENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255641

Amount of Each Disbursement this Period

100.00

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

683.33

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-AMASH-WEB CONTENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255666

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-SASSE-CREATIVE FEE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255648

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-CLAWSON-COPY WRITING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255655

Amount of Each Disbursement this Period

1000.00

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

1600.00

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259859

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-BRANNON-COPY WRITING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259858

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
IE-WHITE-CREATIVE FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259857

Amount of Each Disbursement this Period

500.00

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

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

1250.00

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT LLC**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC E-MARKETING

001

Candidate Name

Category/  
Type

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  
05 / 28 / 2014

Transaction ID : SB21B.259860

Amount of Each Disbursement this Period

408.25

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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  
05 / 01 / 2014

Transaction ID : SB21B.243266

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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  
05 / 01 / 2014

Transaction ID : SB21B.243270

Amount of Each Disbursement this Period

7.95

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

424.15

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address **WORLD FINANCIAL CENTER**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement  
**PAC CC TRANSACTION FEES**

**001**

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.243272**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address **WORLD FINANCIAL CENTER**

City **NEW YORK** State **NY** Zip Code **10285**

Purpose of Disbursement  
**PAC CC TRANSACTION FEES**

**001**

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.243268**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ANTIETAM COMMUNICATIONS**

Mailing Address **710 E NORTHWAY LANE**

City **ATLANTA** State **GA** Zip Code **30342**

Purpose of Disbursement  
**PAC COMMUNICATIONS CONSULTING**

**001**

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.255615**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. ASAP, LLC**

Mailing Address PO BOX 19366

City KALAMAZOO State MI Zip Code 49019

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.255616**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ASAP, LLC**

Mailing Address PO BOX 19366

City KALAMAZOO State MI Zip Code 49019

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.259861**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.243232**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.255627**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 208 S. AKARD STREET

City DALLAS State TX Zip Code 75202

Purpose of Disbursement  
PAC TELEPHONE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.255628**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.255629**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 1907 MAIN STREET

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
PAC SHIPPING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255634**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. KEVIN BROUGHTON**

Mailing Address 631 LIVE OAK DR.

City MADISON State MS Zip Code 39110

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259804**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. OFFICE NETWORKX**

Mailing Address 6969G OLD CANTON ROAD

City RIDGELAND State MS Zip Code 39157

Purpose of Disbursement  
IE-BANNER-SEE LINE 24

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259808**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. JACKSON MARRIOTT**

Mailing Address 200 EAST AMITE STREET

City JACKSON State MS Zip Code 39201

Purpose of Disbursement  
PAC MEETING EXPENSE-MS

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

Transaction ID : SB21B.259811

Amount of Each Disbursement this Period

66.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JACKSON MARRIOTT**

Mailing Address 200 EAST AMITE STREET

City JACKSON State MS Zip Code 39201

Purpose of Disbursement  
IE-EVENT FACILITY RENTAL-SEE LINE 24

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

Transaction ID : SB21B.259812

Amount of Each Disbursement this Period

456.89

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ENTERPRISE RENT A CAR**

Mailing Address 101 HOWARD WILSON LANE

City FLOWOOD State MS Zip Code 39232

Purpose of Disbursement  
PAC TRAVEL EXPENSE-MS

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

Transaction ID : SB21B.259813

Amount of Each Disbursement this Period

411.31

[MEMO ITEM]

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

0.00

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. CAPITOL RESOURCES, INC.**

Mailing Address 700 E. PLEASANT ST.

City State Zip Code  
BROOKLYN IA 52211

Purpose of Disbursement  
IE-BRANNON/SASSE-TELEMARKETING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.255606**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. KELI CARENDER**

Mailing Address 2295 TOWNE LAKE PKWY STE. 116-328

City State Zip Code  
WOODSTOCK GA 30189

Purpose of Disbursement  
PAC GRASSROOTS CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.255678**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DARCY CRISP**

Mailing Address 1855 MOUNTAIN TRACE

City State Zip Code  
CANTON GA 30114

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.243236**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DARCY CRISP**

Mailing Address 1855 MOUNTAIN TRACE

City CANTON State GA Zip Code 30114

Purpose of Disbursement  
PAC FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2014

Transaction ID : SB21B.243237

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2014

Transaction ID : SB21B.243238

Amount of Each Disbursement this Period

1440.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DARCY CRISP**

Mailing Address 1855 MOUNTAIN TRACE

City CANTON State GA Zip Code 30114

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255622

Amount of Each Disbursement this Period

4157.74

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

4157.74

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255623**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DARCY CRISP**

Mailing Address 1855 MOUNTAIN TRACE

City CANTON State GA Zip Code 30114

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259836**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SPECTRA MARKETING & DESIGN INC.**

Mailing Address 1951 CANTON ROAD STE. 320

City MARIETTA State GA Zip Code 30066

Purpose of Disbursement  
IE-MCDANIEL-SIGNS SEE LINE 24

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259840**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE-MS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259841**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HYATT PLACE MEMPHIS**

Mailing Address 1220 PRIMACY PARKWAY

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement  
PAC LODGING-MS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259844**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE HERTZ CORPORATION**

Mailing Address PO BOX 26120

City OKLAHOMA CITY State OK Zip Code 73126

Purpose of Disbursement  
PAC CAR RENTAL-MS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259845**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. TARGET**

Mailing Address 5150 GOODMAN ROAD

City OLIVE BRANCH State MS Zip Code 38654

Purpose of Disbursement  
PAC EVENT SUPPLIES

001

Candidate Name

Category/  
Type

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		
0	5				2	8						2	0	1	4

Transaction ID : SB21B.259846

Amount of Each Disbursement this Period

3	5	6	.	8	7
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HYATT PLACE MEMPHIS**

Mailing Address 1220 PRIMACY PARKWAY

City MEMPHIS State TN Zip Code 38119

Purpose of Disbursement  
PAC LODGING

001

Candidate Name

Category/  
Type

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		
0	5				2	8						2	0	1	4

Transaction ID : SB21B.259856

Amount of Each Disbursement this Period

6	9	1	.	0	4
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

001

Candidate Name

Category/  
Type

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		
0	5				2	8						2	0	1	4

Transaction ID : SB21B.259838

Amount of Each Disbursement this Period

1	8	9	.	7	5	0
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[MEMO ITEM]

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

0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

0	0	0
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**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AVIS CAR RENTAL**

Mailing Address 2491 WINCHESTER ROAD

City MEMPHIS State TN Zip Code 38116

Purpose of Disbursement  
PAC CAR RENTAL

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.259839**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DIRECT CONCEPTS**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC GRAPHIC DESIGN

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255674**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DONOR BUREAU LLC**

Mailing Address 1900 N. CULPEPPER ST.

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC DONOR SERVICES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.243307**

Amount of Each Disbursement this Period

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

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



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. BRAD ESSEX**

Mailing Address 5535 E 3RD STREET

City State Zip Code  
TULSA OK 74112

Purpose of Disbursement  
PAC PHOTOGRAPH PURCHASE

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.243302**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. F3 FILMS LLC**

Mailing Address 299 WOODLAND BROOK DR.

City State Zip Code  
MADISON MS 39110

Purpose of Disbursement  
PAC MEDIA PRODUCTION

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.259862**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
PAC BANK FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.243269**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
PAC BANK FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.243265**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
PAC BANK FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.243263**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FOLEY & LARDNER LLP**

Mailing Address 3000 K STREET NW  
STE. 600

City State Zip Code  
WASHINGTON DC 20007

Purpose of Disbursement  
PAC LEGAL FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.255607**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. GEB INTERNATIONAL INC.**

Mailing Address 710 E. NORTHWAY LANE

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement  
PAC SURVEYS/RESEARCH

001

Candidate Name

Category/  
Type

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  
05 / 07 / 2014

Transaction ID : SB21B.243301

Amount of Each Disbursement this Period

56926.00

Full Name (Last, First, Middle Initial)

**B. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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  
05 / 02 / 2014

Transaction ID : SB21B.243267

Amount of Each Disbursement this Period

1488.74

Full Name (Last, First, Middle Initial)

**C. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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  
05 / 02 / 2014

Transaction ID : SB21B.243264

Amount of Each Disbursement this Period

50.25

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

58464.99

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. GLOBAL PAYMENTS**

Mailing Address 10 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

Transaction ID : SB21B.243271

Amount of Each Disbursement this Period

1660.47

Full Name (Last, First, Middle Initial)

**B. HOGENSON COMMUNICATIONS LLC**

Mailing Address PO BOX 784

City NORTH BEACH State MD Zip Code 20714

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2014

Transaction ID : SB21B.243233

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2014

Transaction ID : SB21B.243308

Amount of Each Disbursement this Period

4906.21

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

7566.68

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 14 / 2014

Transaction ID : SB21B.255675

Amount of Each Disbursement this Period

43621.37

Full Name (Last, First, Middle Initial)

**B. NICO JANSSEN**

Mailing Address TROMMELSTRAAT 74  
1312 WH ALMERE

City State NN Zip Code

Purpose of Disbursement  
PAC WEB DESIGN

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259909

Amount of Each Disbursement this Period

212.50

Full Name (Last, First, Middle Initial)

**C. MRS. JENNIFER MARTIN**

Mailing Address 2295 TOWNE LAKE PARKWAY  
STE. 116-328

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
PAC STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2014

Transaction ID : SB21B.243231

Amount of Each Disbursement this Period

15000.00

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

58833.87

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. MRS. JENNIFER MARTIN**

Mailing Address 2295 TOWNE LAKE PARKWAY  
STE. 116-328

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.255608**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HYATT REGENCT**

Mailing Address 265 PEACHTREE STREET NE

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement  
PAC LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.255609**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. MRS. JENNIFER MARTIN**

Mailing Address 2295 TOWNE LAKE PARKWAY  
STE. 116-328

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
SEE MEMO

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.255625**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. TWILIO INC.**

Mailing Address 548 MARKET ST. #14510

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
PAC ROBO CALLS

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.255626**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. KEVIN L. MOONEYHAN**

Mailing Address 145 EAGLE GLEN DR.

City State Zip Code  
WOODSTOCK GA 30189

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.243234**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. KEVIN L. MOONEYHAN**

Mailing Address 145 EAGLE GLEN DR.

City State Zip Code  
WOODSTOCK GA 30189

Purpose of Disbursement  
SEE MEMO

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.255610**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 1200 12TH AVE S STE. 1200

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement  
PAC OFFICE EQUIPMENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2014

Transaction ID : SB21B.255611

Amount of Each Disbursement this Period

665.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LINDA H. PARKER**

Mailing Address 2021 CRESTHAVEN WALK

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
PAC FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2014

Transaction ID : SB21B.255679

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. LINDA H. PARKER**

Mailing Address 2021 CRESTHAVEN WALK

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259867

Amount of Each Disbursement this Period

9143.37

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

10143.37

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



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. CHICK-FIL-A**

Mailing Address 5200 BUFFINGTON ROAD

City ATLANTA State GA Zip Code 30349

Purpose of Disbursement  
PAC MEETING EXPENSE-MS

001

Candidate Name

Category/  
Type

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
05		28		2014

Transaction ID : SB21B.259872

Amount of Each Disbursement this Period

62.16
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. COUNTRY INN & SUITES**

Mailing Address 3051 WHITE BLVD.

City PEARL State MS Zip Code 39208

Purpose of Disbursement  
PAC LODGING-MS

001

Candidate Name

Category/  
Type

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
05		28		2014

Transaction ID : SB21B.259873

Amount of Each Disbursement this Period

536.28
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE-MS

001

Candidate Name

Category/  
Type

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
05		28		2014

Transaction ID : SB21B.259874

Amount of Each Disbursement this Period

2772.00
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[MEMO ITEM]

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SHELL OIL**

Mailing Address 910 LOUISIANA ST.

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement  
PAC TRAVEL EXPENSE-MS

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	4

Transaction ID : SB21B.259876

Amount of Each Disbursement this Period

2	2	4	.	8	4
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FIVE STAR**

Mailing Address PO BOX 2225

City ACWORTH State GA Zip Code 30102

Purpose of Disbursement  
PAC TRAVEL EXPENSE-MS

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	4

Transaction ID : SB21B.259878

Amount of Each Disbursement this Period

2	3	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HAMPTON INN**

Mailing Address 13921 BIG RIDGE ROAD

City BILOXI State MS Zip Code 39532

Purpose of Disbursement  
PAC LODGING-MS

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	4

Transaction ID : SB21B.259879

Amount of Each Disbursement this Period

6	3	5	.	5	8
---	---	---	---	---	---

[MEMO ITEM]

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

0	0	0	.	0	0
---	---	---	---	---	---

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

0	0	0	.	0	0
---	---	---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. HOME2 SUITES**

Mailing Address 3810 PROMENADE PKWY

City D'IBERVILLE State MS Zip Code 39540

Purpose of Disbursement  
PAC LODGING-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259881

Amount of Each Disbursement this Period

6	2	1	.	7	4
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ID BUILDERS INC.**

Mailing Address 1260 RONNIE DR.

City MARIETTA State GA Zip Code 30062

Purpose of Disbursement  
PAC T-SHIRTS-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259882

Amount of Each Disbursement this Period

9	8	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. OFFICE DEPOT**

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement  
PAC OFFICE SUPPLIES-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259887

Amount of Each Disbursement this Period

8	2	7	.	4	1
---	---	---	---	---	---

[MEMO ITEM]

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

0	0	0	.	0	0
---	---	---	---	---	---

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

0	0	0	.	0	0
---	---	---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SHAGGYS SEAFOOD**

Mailing Address 1763 BEACH BLVD.

City BILOXI State MS Zip Code 39531

Purpose of Disbursement  
PAC MEETING EXPENSES-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259892

Amount of Each Disbursement this Period

2	3	9	.	7	5
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TARGET**

Mailing Address 5150 GOODMAN ROAD

City OLIVE BRANCH State MS Zip Code 38654

Purpose of Disbursement  
PAC OFFICE SUPPLIES-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259901

Amount of Each Disbursement this Period

5	2	.	5	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
PAC SHIPPING-MS

001

Candidate Name

Category/  
Type

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
0	5			2	8			2	0	1	4		

Transaction ID : SB21B.259904

Amount of Each Disbursement this Period

4	3	8	.	3	6
---	---	---	---	---	---

[MEMO ITEM]

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

0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716

Purpose of Disbursement  
PAC OFFICE SUPPLIES-MS

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259907

Amount of Each Disbursement this Period

164.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PATRIOT DATA SERVICES**

Mailing Address 44845 FALCON PL  
STE. 101A

City DULLES State VA Zip Code 20166

Purpose of Disbursement  
PAC DATA WORK

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2014

Transaction ID : SB21B.243309

Amount of Each Disbursement this Period

1259.08

Full Name (Last, First, Middle Initial)

**C. RACHEL L. PROCTOR**

Mailing Address 8984 HEATH COVE

City CORDOVA State TN Zip Code 38016

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2014

Transaction ID : SB21B.255680

Amount of Each Disbursement this Period

5000.00

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

6259.08

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. CANDLEWOOD SUITES**

Mailing Address 7448 CRAFT AND GOODMAN ROAD

City OLIVE BRANCH State MS Zip Code 38654

Purpose of Disbursement  
PAC LODGING-MS

001

Candidate Name

Category/  
Type

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
0	5			1	6			2	0	1	4		

Transaction ID : SB21B.276502

Amount of Each Disbursement this Period

9	7	5	.	4	7
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE HERTZ CORPORATION**

Mailing Address PO BOX 26120

City OKLAHOMA CITY State OK Zip Code 73126

Purpose of Disbursement  
PAC CAR RENTAL-MS

001

Candidate Name

Category/  
Type

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
0	5			1	6			2	0	1	4		

Transaction ID : SB21B.276509

Amount of Each Disbursement this Period

1	6	2	5	.	4	5
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HOLIDAY INN EXPRESS**

Mailing Address 8900 EXPRESSWAY DRIVE

City OLIVE BRANCH State MS Zip Code 38654

Purpose of Disbursement  
PAC LODGING-MS

001

Candidate Name

Category/  
Type

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
0	5			1	6			2	0	1	4		

Transaction ID : SB21B.276510

Amount of Each Disbursement this Period

8	2	8	.	4	0
---	---	---	---	---	---

[MEMO ITEM]

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

0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

0	0	0
---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. RACHEL L. PROCTOR**

Mailing Address 8984 HEATH COVE

City State Zip Code  
CORDOVA TN 38016

Purpose of Disbursement  
PAC TRANSPORTATION-NO ITEMIZATION NECESSARY

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259911

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES INC.**

Mailing Address 2470 DANIELL'S BRIDGE ROAD  
STE. 121

City State Zip Code  
ATHENS GA 30606

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259910

Amount of Each Disbursement this Period

6675.88

Full Name (Last, First, Middle Initial)

**C. ROBERTSON MAILING LIST COMPANY**

Mailing Address 21955 CASCADES PARKWAY

City State Zip Code  
DULLES VA 20166

Purpose of Disbursement  
PAC LIST ACQUISITION

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2014

Transaction ID : SB21B.243310

Amount of Each Disbursement this Period

3162.47

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

9868.35

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SHIRLEY & BANISTER PUBLIC AFFAIRS**

Mailing Address 122 SOUTH PATRICK STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC PUBLIC RELATIONS CONSULTING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.255612**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. SHIRLEY & BANISTER PUBLIC AFFAIRS**

Mailing Address 122 SOUTH PATRICK STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC PUBLIC RELATIONS CONSULTING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.259913**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SHONDA WERRY, LLC**

Mailing Address 1025 FIRST STREET SE UNIT 1007

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAC STRATEGY CONSULTING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : **SB21B.243235**

Amount of Each Disbursement this Period

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

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



**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

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  
05 / 07 / 2014

Transaction ID : SB21B.243311

Amount of Each Disbursement this Period

5097.36

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC DIRECT MAIL PRODUCTION

001

Candidate Name

Category/  
Type

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  
05 / 09 / 2014

Transaction ID : SB21B.255605

Amount of Each Disbursement this Period

101223.60

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING**

Mailing Address 2600 NEW TOPEKA BLVD.

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Category/  
Type

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  
05 / 14 / 2014

Transaction ID : SB21B.255676

Amount of Each Disbursement this Period

6068.69

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

112389.65

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. STERLING COMMUNICATION**

Mailing Address 642 CRAWFORD ST.  
TORONTO, ONTARIO

City M6G 3K2 State Zip Code

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.243241**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.255673**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. STRATEGIC FUNDRAISING**

Mailing Address 7800 3RD STREET N STE. 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
PAC LIST RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.259820**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 SECOND STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
PAC CC TRANSACTION FEES

001

Candidate Name

Category/  
Type

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
0	5			3	1			2	0	1	4		

Transaction ID : SB21B.259934

Amount of Each Disbursement this Period

3	1	7	4	.	3	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SUNTRUST BANK**

Mailing Address PO BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

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
0	5			0	1			2	0	1	4		

Transaction ID : SB21B.243239

Amount of Each Disbursement this Period

1	2	3	1	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

001

Candidate Name

Category/  
Type

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
0	5			0	1			2	0	1	4		

Transaction ID : SB21B.243240

Amount of Each Disbursement this Period

1	2	3	1	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]

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

4	4	0	5	.	3	9
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**TOTAL** This Period (last page this line number only)..... ▶

4	4	0	5	.	3	9
---	---	---	---	---	---	---

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. SUNTRUST BANK**

Mailing Address PO BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

Transaction ID : SB21B.259829

Amount of Each Disbursement this Period

137.00

Full Name (Last, First, Middle Initial)

**B. SUNTRUST BANK**

Mailing Address PO BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259914

Amount of Each Disbursement this Period

1658.43

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2014

Transaction ID : SB21B.259915

Amount of Each Disbursement this Period

1453.00

[MEMO ITEM]

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

1795.43

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. TAYLOR ENGLISH DUMA LLP**

Mailing Address 1600 PARKWOOD CIRCLE  
STE. 400

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
PAC LEGAL FEES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255637**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. TELEPHONE TOWN HALL MEETING INC.**

Mailing Address 958 CONEFLOWER DR.

City GOLDEN State CO Zip Code 80401

Purpose of Disbursement  
IE-BRANNON/SASSE-TELEMARKETING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255613**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. THE JACKSON-ALVAREZ GROUP**

Mailing Address PO BOX 7272

City MCLEAN State VA Zip Code 22106

Purpose of Disbursement  
PAC RESEARCH

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.255614**

Amount of Each Disbursement this Period

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

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. THE RICHARD NORMAN COMPANY**

Mailing Address 44084 RIVERSIDE PARKWAY  
STE. 360

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement  
PAC DIRECT MAIL FUNDRAISING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2014

Transaction ID : SB21B.243312

Amount of Each Disbursement this Period

32549.05

Full Name (Last, First, Middle Initial)

**B. VICTORY MEDIA GROUP**

Mailing Address 1701 EAST LAKE AVE.  
STE. 335

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
SEE LINE 24 MEMOS

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2014

Transaction ID : SB21B.243273

Amount of Each Disbursement this Period

47600.00

Full Name (Last, First, Middle Initial)

**C. VICTORY MEDIA GROUP**

Mailing Address 1701 EAST LAKE AVE.  
STE. 335

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement  
IE-CLAWSON-TELEMARKETING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2014

Transaction ID : SB21B.255617

Amount of Each Disbursement this Period

11395.95

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

91545.00

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

**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)  
**TEA PARTY PATRIOTS CITIZENS FUND**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC POSTAGE

001  
Category/  
Type

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
05	/	07	/	2014

Transaction ID : SB21B.243313

Amount of Each Disbursement this Period

1595.23
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Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PAC CAGING & ESCROW

001  
Category/  
Type

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
05	/	14	/	2014

Transaction ID : SB21B.259803

Amount of Each Disbursement this Period

179.13
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

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
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Amount of Each Disbursement this Period

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

1774.36
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**TOTAL** This Period (last page this line number only)..... ▶

651633.51
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 216 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPITOL RESOURCES, INC.</b>	Nature of Debt (Purpose): IE-BRANNON/SASSE-TELEMARKETING-SEE LINE 24
Mailing Address 700 E. PLEASANT ST.	
City State Zip Code BROOKLYN IA 52211	

Outstanding Balance Beginning This Period 3642.50	<b>Transaction ID : SD10.5</b>	
Amount Incurred This Period 0.00	Payment This Period 3642.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TELEPHONE TOWN HALL MEETING INC.</b>	Nature of Debt (Purpose): IE-BRANNON/SASSE-TELEMARKETING-SEE LINE 24
Mailing Address 958 CONEFLOWER DR.	
City State Zip Code GOLDEN CO 80401	

Outstanding Balance Beginning This Period 24917.09	<b>Transaction ID : SD10.6</b>	
Amount Incurred This Period 0.00	Payment This Period 24917.09	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY MEDIA GROUP</b>	Nature of Debt (Purpose): IE-CLAWSON-TELEMARKETING-SEE LINE 24
Mailing Address 1701 EAST LAKE AVE. STE. 335	
City State Zip Code GLENVIEW IL 60025	

Outstanding Balance Beginning This Period 11395.95	<b>Transaction ID : SD10.7</b>	
Amount Incurred This Period 0.00	Payment This Period 11395.95	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 217 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.8</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.9</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.10</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 218 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="333.33"/>	<b>Transaction ID : SD10.11</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="333.33"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.12</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.13</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 219 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BRANNON-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="1394.00"/>	<b>Transaction ID : SD10.14</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1394.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-LYNCH-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.15</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.16</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
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NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>		Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		
City LANSLOWNE	State VA	Zip Code 20176

Outstanding Balance Beginning This Period 250.00	<b>Transaction ID : SD10.17</b>	
Amount Incurred This Period 0.00	Payment This Period 250.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>		Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		
City LANSLOWNE	State VA	Zip Code 20176

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.18</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>		Nature of Debt (Purpose): IE-MCDANIEL-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		
City LANSLOWNE	State VA	Zip Code 20176

Outstanding Balance Beginning This Period 333.34	<b>Transaction ID : SD10.19</b>	
Amount Incurred This Period 0.00	Payment This Period 333.34	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 221 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 1394.00	<b>Transaction ID : SD10.20</b>	
Amount Incurred This Period 0.00	Payment This Period 1394.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCCLINTOCK-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.21</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MCCLINTOCK-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID : SD10.22</b>	
Amount Incurred This Period 0.00	Payment This Period 100.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 222 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BIRMAN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.23</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-CLAWSON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>	<b>Transaction ID : SD10.24</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-CLAWSON-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>	<b>Transaction ID : SD10.25</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 223 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.26</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.27</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-BEVIN-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="333.33"/>	<b>Transaction ID : SD10.28</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="333.33"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 224 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-KING-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.29</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-KING-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>	<b>Transaction ID : SD10.30</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="100.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-AMASH-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>	<b>Transaction ID : SD10.31</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="100.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 225 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-AMASH-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.32</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SCOTT-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.33</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SCOTT-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID : SD10.34</b>	
Amount Incurred This Period 0.00	Payment This Period 100.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 226 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.35</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-COPY WRITING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>	<b>Transaction ID : SD10.36</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SASSE-E-MARKETING
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="1394.00"/>	<b>Transaction ID : SD10.37</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1394.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 227 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-SHANNON-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.38</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-GOHMERT-CREATIVE FEE
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.39</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-GOHMERT-WEB CONTENT
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID : SD10.40</b>	
Amount Incurred This Period 0.00	Payment This Period 100.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 228 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-MEADOWS-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.41</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT LLC</b>	Nature of Debt (Purpose): IE-WHITE-CREATIVE FEES
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	
City State Zip Code LANSDOWNE VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : SD10.42</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GROUND FLOOR, LLC</b>	Nature of Debt (Purpose): IE-MCDANIEL-MEDIA PRODUCTION
Mailing Address 110 ARNOLD MILL PARK STE. 200	
City State Zip Code WOODSTOCK GA 30188	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.43</b>	
Amount Incurred This Period <input type="text" value="3250.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3250.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3250.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 229 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPITOL RESOURCES, INC.</b>	Nature of Debt (Purpose): IE-COCHRAN-TELEMARKETING
Mailing Address 700 E. PLEASANT ST.	
City State Zip Code BROOKLYN IA 52211	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.45</b>	
Amount Incurred This Period 623.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 623.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CAPITOL RESOURCES, INC.</b>	Nature of Debt (Purpose): IE-MCDANIEL-TELEMARKETING
Mailing Address 700 E. PLEASANT ST.	
City State Zip Code BROOKLYN IA 52211	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.46</b>	
Amount Incurred This Period 623.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 623.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TELEPHONE TOWN HALL MEETING INC.</b>	Nature of Debt (Purpose): IE-COCHRAN-TELEMARKETING
Mailing Address 958 CONEFLOWER DR.	
City State Zip Code GOLDEN CO 80401	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.47</b>	
Amount Incurred This Period 2712.30	Payment This Period 0.00	Outstanding Balance at Close of This Period 2712.30

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3959.30
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 230 OF 272
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY PATRIOTS CITIZENS FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TELEPHONE TOWN HALL MEETING INC.</b>	Nature of Debt (Purpose): IE-MCDANIEL-TELEMARKETING
Mailing Address 958 CONEFLOWER DR.	
City State Zip Code GOLDEN CO 80401	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.48</b>	
Amount Incurred This Period 2712.31	Payment This Period 0.00	Outstanding Balance at Close of This Period 2712.31

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2712.31
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	9921.61
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	9921.61

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 01 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>500.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243242</b>
Purpose of Expenditure COPY WRITING	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 28 / 2014</b>
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
	<b>27006.07</b>

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 02 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>500.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243243</b>
Purpose of Expenditure COPY WRITING	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 28 / 2014</b>
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
	<b>27506.07</b>

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<b>1000.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	
<b>(c) TOTAL</b> Independent Expenditures..... ►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 02 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="float:right">500.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243247</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <span style="float:right">001</span>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="float:right">9998.94</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 03 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="float:right">1000.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243277</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure ACTIVE ENGAGEMENT	Category/Type <span style="float:right">001</span>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="float:right">23426.94</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">1500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 06 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>500.00</b>
City LANSDOWNE	State VA	Zip Code 20176
Purpose of Expenditure CREATIVE FEES	Category/Type 001	Transaction ID : <b>SE.243297</b> Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 28 / 2014</b>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>14</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <b>33796.63</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 13 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>1560.00</b>
City LANSDOWNE	State VA	Zip Code 20176
Purpose of Expenditure COPY WRITING	Category/Type 001	Transaction ID : <b>SE.255685</b> Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 13 / 2014</b>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b>
Calendar Year-To-Date Per Election for Office Sought <b>13536.26</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>2060.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*  
 Signature

[Electronically Filed] Date **06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 17 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="float:right">2091.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.255698</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure DIRECT MARKETING	Category/Type <span style="float:right">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">34147.68</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 18 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="float:right">500.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.259821</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <span style="float:right">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">34647.68</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">2591.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="float:right"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001

Date of Public Distribution/Dissemination
05 / 18 / 2014
Amount
250.00
Transaction ID : SE.259824
Date of Disbursement or Obligation
05 / 28 / 2014

Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
34931.43

Disbursement For:
Primary General
2014 Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
COPY WRITING Category/
Type
001

Date of Public Distribution/Dissemination
05 / 24 / 2014
Amount
500.00
Transaction ID : SE.259833
Date of Disbursement or Obligation
05 / 28 / 2014

Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
614510.17

Disbursement For:
Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 750.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE
[Electronically Filed]
Date
06 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 26 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="margin-left: 20px;">1000.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.259835</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <span style="margin-left: 20px;">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">616510.17</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="margin-left: 20px;">1000.00</span>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.259919</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>05 / 28 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <span style="margin-left: 20px;">001</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">618580.17</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">2000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 29 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>1000.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.259920</b>
Purpose of Expenditure COPY WRITING	Category/ Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 28 / 2014</b>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>619580.17</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 30 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>1000.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.259921</b>
Purpose of Expenditure COPY WRITING	Category/ Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 28 / 2014</b>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>621110.17</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>2000.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE

Signature \_\_\_\_\_ [Electronically Filed] Date **06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 31 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>1500.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.259922</b>
Purpose of Expenditure COPY WRITING	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 28 / 2014</b>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>625130.17</b>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 17 / 2014</b>	
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount <b>250.00</b>	
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE.259822</b>
Purpose of Expenditure COPY WRITING	Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 28 / 2014</b>	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>850.00</b>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1750.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 06 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>1000.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243223</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 28 / 2014</b>
Purpose of Expenditure COPY WRITING	Category/Type <b>001</b>
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought <b>17923.79</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 17 / 2014</b>
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <b>2091.00</b>
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.255699</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 28 / 2014</b>
Purpose of Expenditure DIRECT MARKETING	Category/Type <b>001</b>
Name of Federal Candidate T W SHANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OK</u>
Calendar Year-To-Date Per Election for Office Sought <b>2591.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>3091.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 01 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span> 100.00
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243246</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 28 / 2014
Purpose of Expenditure WEB CONTENT	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate ALEXANDER XAVIER MOONEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: WV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span> 600.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span> 500.00
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243256</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 28 / 2014
Purpose of Expenditure CREATIVE FEES	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate JAMES D JORDAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span> 500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span> 600.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">M M M M / D D / Y Y Y Y Y Y</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 100.00
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243257</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 28 / 2014
Purpose of Expenditure WEB CONTENT	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate JAMES D JORDAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 600.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 06 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350	Amount <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 500.00
City State Zip Code LANSDOWNE VA 20176	<b>Transaction ID : SE.243293</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 28 / 2014
Purpose of Expenditure CREATIVE FEES	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate SAMUEL CLOVIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 56500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 600.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
06 / 20 / 2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ACTIVE ENGAGEMENT LLC
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
CREATIVE FEES Category/
Type
001
Name of Federal Candidate
JEFF SESSIONS Support
Office Sought:
House District: 00
Senate State: AL
Calendar Year-To-Date
Per Election for Office Sought
500.00

Date of Public Distribution/Dissemination
05 / 09 / 2014
Amount
500.00
Transaction ID : SE.243299
Date of Disbursement or Obligation
05 / 28 / 2014
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ACTIVE ENGAGEMENT LLC
Mailing Address
44084 RIVERSIDE PARKWAY
STE. 350
City
LANSDOWNE State
VA Zip Code
20176
Purpose of Expenditure
WEB CONTENT Category/
Type
001
Name of Federal Candidate
JEFF SESSIONS Support
Office Sought:
House District: 00
Senate State: AL
Calendar Year-To-Date
Per Election for Office Sought
600.00

Date of Public Distribution/Dissemination
05 / 09 / 2014
Amount
100.00
Transaction ID : SE.243300
Date of Disbursement or Obligation
05 / 28 / 2014
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 600.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE [Electronically Filed] Date 06 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 22 / 2014
Mailing Address 44084 RIVERSIDE PARKWAY STE. 350		Amount 500.00
City LANSDOWNE	State VA	Zip Code 20176
Purpose of Expenditure GRAPHIC DESIGN	Category/Type 001	Transaction ID : <b>SE.259830</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 28 / 2014
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	552228.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ANTIETAM COMMUNICATIONS</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2014
Mailing Address 710 E NORTHWAY LANE		Amount 1000.00
City ATLANTA	State GA	Zip Code 30342
Purpose of Expenditure SCRIPT WRITING	Category/Type 001	Transaction ID : <b>SE.243282</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	40384.79	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	500.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ Date MM / DD / YYYY 06 / 20 / 2014

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ANTIETAM COMMUNICATIONS
MEMO ITEM
Mailing Address 710 E NORTHWAY LANE
City ATLANTA State GA Zip Code 30342
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Name of Federal Candidate GREGORY JOSEPH BRANNON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 41962.73

Date of Public Distribution/Dissemination 05/05/2014
Amount 500.00
Transaction ID : SE.243284
Date of Disbursement or Obligation 05/05/2014
Office Sought: House District: 00 President Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
ANTIETAM COMMUNICATIONS
MEMO ITEM
Mailing Address 710 E NORTHWAY LANE
City ATLANTA State GA Zip Code 30342
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Name of Federal Candidate MATT LYNCH Support Oppose
Calendar Year-To-Date Per Election for Office Sought 25937.10

Date of Public Distribution/Dissemination 05/04/2014
Amount 500.00
Transaction ID : SE.243280
Date of Disbursement or Obligation 05/04/2014
Office Sought: House District: 14 President Senate State: OH
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE [Electronically Filed] Date 06/20/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
ANTIETAM COMMUNICATIONS
[MEMO ITEM]
Mailing Address 710 E NORTHWAY LANE
City ATLANTA State GA Zip Code 30342
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Name of Federal Candidate MATT LYNCH Support Oppose
Calendar Year-To-Date Per Election for Office Sought 32736.42

Date of Public Distribution/Dissemination 05/05/2014
Amount 500.00
Transaction ID : SE.243286
Date of Disbursement or Obligation 05/05/2014
Office Sought: House District: 14 State: OH
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
ANTIETAM COMMUNICATIONS
[MEMO ITEM]
Mailing Address 710 E NORTHWAY LANE
City ATLANTA State GA Zip Code 30342
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Name of Federal Candidate DAVID P JOYCE Support Oppose
Calendar Year-To-Date Per Election for Office Sought 16926.94

Date of Public Distribution/Dissemination 05/02/2014
Amount 1000.00
Transaction ID : SE.243251
Date of Disbursement or Obligation 05/02/2014
Office Sought: House District: 14 State: OH
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE [Electronically Filed] Date 06/20/2014
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>ANTIETAM COMMUNICATIONS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 04 / 2014
Mailing Address 710 E NORTHWAY LANE	Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>
City State Zip Code ATLANTA GA 30342	<b>Transaction ID : SE.243281</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 04 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate DAVID P JOYCE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26437.10</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>ANTIETAM COMMUNICATIONS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 24 / 2014
Mailing Address 710 E NORTHWAY LANE	Amount <span style="border: 1px solid black; padding: 2px;">1000.00</span>
City State Zip Code ATLANTA GA 30342	<b>Transaction ID : SE.259834</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 24 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">615510.17</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CAPITOL RESOURCES, INC.</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014	
Mailing Address 700 E. PLEASANT ST.		Amount <span style="border: 1px solid black; padding: 2px;">623.50</span>	
City BROOKLYN	State IA	Zip Code 52211	<b>Transaction ID : SE.255694</b>
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26008.57</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>CAPITOL RESOURCES, INC.</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014	
Mailing Address 700 E. PLEASANT ST.		Amount <span style="border: 1px solid black; padding: 2px;">623.50</span>	
City BROOKLYN	State IA	Zip Code 52211	<b>Transaction ID : SE.255695</b>
Purpose of Expenditure TELEMARKETING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014	
Name of Federal Candidate THAD COCHRAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26632.07</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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MR. PAULA KILGORE

[Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
06 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
CREATIVE RESPONSE CONCEPTS
MEMO ITEM
Mailing Address
2760 EISENHOWER AVE. 4TH FL
City
ALEXANDRIA State
VA Zip Code
22314
Purpose of Expenditure
E-MARKETING-ALLOCATION OF RETAINER
Category/Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
617080.17

Date of Public Distribution/Dissemination
05 / 27 / 2014
Amount
570.00
Transaction ID : SE.259923
Date of Disbursement or Obligation
05 / 27 / 2014
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
CREATIVE RESPONSE CONCEPTS
MEMO ITEM
Mailing Address
2760 EISENHOWER AVE. 4TH FL
City
ALEXANDRIA State
VA Zip Code
22314
Purpose of Expenditure
E-MARKETING-ALLOCATION OF RETAINER
Category/Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
620110.17

Date of Public Distribution/Dissemination
05 / 29 / 2014
Amount
530.00
Transaction ID : SE.259925
Date of Disbursement or Obligation
05 / 29 / 2014
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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MR. PAULA KILGORE
[Electronically Filed]
Date
06 / 20 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
CREATIVE RESPONSE CONCEPTS
MEMO ITEM
Mailing Address
2760 EISENHOWER AVE. 4TH FL
City
ALEXANDRIA State
VA Zip Code
22314
Purpose of Expenditure
E-MARKETING-ALLOCATION OF RETAINER
Category/Type
001
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
621140.17

Date of Public Distribution/Dissemination
05 / 30 / 2014
Amount
30.00
Transaction ID : SE.259926
Date of Disbursement or Obligation
05 / 30 / 2014
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
CREATIVE RESPONSE CONCEPTS
MEMO ITEM
Mailing Address
2760 EISENHOWER AVE. 4TH FL
City
ALEXANDRIA State
VA Zip Code
22314
Purpose of Expenditure
E-MARKETING-ALLOCATION OF RETAINER
Category/Type
001
Name of Federal Candidate
THAD COCHRAN
Support
Oppose
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
14556.26

Date of Public Distribution/Dissemination
05 / 14 / 2014
Amount
1020.00
Transaction ID : SE.255681
Date of Disbursement or Obligation
05 / 14 / 2014
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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MR. PAULA KILGORE
[Electronically Filed]
Date 06 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CREATIVE RESPONSE CONCEPTS</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 21 / 2014
Mailing Address 2760 EISENHOWER AVE. 4TH FL	Amount <span style="border: 1px solid black; padding: 2px;">22500.00</span>
City State Zip Code ALEXANDRIA VA 22314	<b>Transaction ID : SE.259819</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 21 / 2014
Purpose of Expenditure ONLINE ADVERTISING	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">551728.22</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>DIGITAL ACUMEN</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 02 / 2014
Mailing Address PO BOX 537	Amount <span style="border: 1px solid black; padding: 2px;">5000.00</span>
City State Zip Code NEW HAMPTON NH 03256	<b>Transaction ID : SE.243252</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 05 / 09 / 2014
Purpose of Expenditure MEDIA PROMOTION	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate DAVID P JOYCE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">21926.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">27500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>JAMESTOWN ASSOCIATES</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 20 / 2014</b>	
Mailing Address 5 MAPLETON ROAD STE. 300		Amount <b>376183.63</b>	
City PRINCETON	State NJ	Zip Code 08540	<b>Transaction ID : SE.259816</b>
Purpose of Expenditure MEDIA BUY	Category/Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 21 / 2014</b>	
Name of Federal Candidate THAD COCHRAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>411115.06</b>	

Full Name of Payee <b>KING GROUP PRODUCTIONS</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 02 / 2014</b>	
Mailing Address 29 DEERFIELD ROAD		Amount <b>898.00</b>	
City DEERFIELD	State IL	Zip Code 60015	<b>Transaction ID : SE.243249</b>
Purpose of Expenditure MEDIA PRODUCTION	Category/Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 09 / 2014</b>	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>10896.94</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>377081.63</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>	

Full Name of Payee <b>KASEY KIRBY</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1132 6TH STREET NE UNIT 1	Amount 5030.00
City State Zip Code WASHINGTON DC 20002	<b>Transaction ID : SE.243250</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 09 / 2014
Purpose of Expenditure MEDIA PRODUCTION	Category/Type 001
Name of Federal Candidate DAVID P JOYCE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 15926.94	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>LABELS AND LISTS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 05 / 2014
Mailing Address 2500 116TH AVE NE	Amount 54.00
City State Zip Code BELLEVUE WA 98004	<b>Transaction ID : SE.243291</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 05 / 2014
Purpose of Expenditure LIST ACQUISITION	Category/Type 001
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 42032.12	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	5030.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>LABELS AND LISTS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 05 / 2014
Mailing Address 2500 116TH AVE NE	Amount 54.00
City BELLEVUE      State WA      Zip Code 98004	<b>Transaction ID : SE.243288</b>
Purpose of Expenditure LIST ACQUISITION	Date of Disbursement or Obligation MM / DD / YYYY 05 / 05 / 2014
Name of Federal Candidate MATT LYNCH	Category/Type 001
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input checked="" type="checkbox"/> House    District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: OH
32796.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>LABELS AND LISTS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 30 / 2014
Mailing Address 2500 116TH AVE NE	Amount 2490.00
City BELLEVUE      State WA      Zip Code 98004	<b>Transaction ID : SE.259929</b>
Purpose of Expenditure LIST ACQUISITION	Date of Disbursement or Obligation MM / DD / YYYY 05 / 30 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Category/Type 001
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS
623630.17	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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MR. PAULA KILGORE

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>LABELS AND LISTS</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 06 / 2014
Mailing Address 2500 116TH AVE NE	Amount 3304.20
City BELLEVUE State WA Zip Code 98004	<b>Transaction ID : SE.243305</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 06 / 2014
Purpose of Expenditure LIST ACQUISITION Category/Type 001	Name of Federal Candidate BENJAMIN E SASSE <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 21236.09	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>SPECTRA MARKETING &amp; DESIGN INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2014
Mailing Address 1951 CANTON ROAD STE. 320	Amount 5944.00
City MARIETTA State GA Zip Code 30066	<b>Transaction ID : SE.259818</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 05 / 21 / 2014
Purpose of Expenditure YARD SIGNS Category/Type 001	Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 529228.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE  
Signature

[Electronically Filed] Date 06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>TALK RADIO 1580 WPMO AM</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 21 / 2014</b>
Mailing Address PO BOX 39568	Amount <b>700.00</b>
City State Zip Code <b>PASCAGOULA MS 39568</b>	<b>Transaction ID : SE.259796</b> Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 19 / 2014</b>
Purpose of Expenditure RADIO ADVERTISING	Category/Type <b>001</b>
Name of Federal Candidate <b>THAD COCHRAN</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u> <input type="checkbox"/> President    State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>523284.22</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>TELEPHONE TOWN HALL MEETING INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 15 / 2014</b>
Mailing Address 958 CONEFLOWER DR.	Amount <b>2712.31</b>
City State Zip Code <b>GOLDEN CO 80401</b>	<b>Transaction ID : SE.255696</b> Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 15 / 2014</b>
Purpose of Expenditure TELEMARKETING	Category/Type <b>001</b>
Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u> <input type="checkbox"/> President    State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>29344.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>700.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>TELEPHONE TOWN HALL MEETING INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014
Mailing Address 958 CONEFLOWER DR.	Amount <span style="border: 1px solid black; padding: 2px;">2712.30</span>
City GOLDEN State CO Zip Code 80401	<b>Transaction ID : SE.255697</b>
Purpose of Expenditure TELEMARKETING	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 15 / 2014
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32056.68</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>
City WOODSTOCK State GA Zip Code 30189	<b>Transaction ID : SE.243292</b>
Purpose of Expenditure SCRIPT WRITING	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">42532.12</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2014

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 05 / 02 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount <span style="float:right">500.00</span>
City State Zip Code WOODSTOCK GA 30189	<b>Transaction ID : SE.243254</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 05 / 02 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type 001
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President <input type="checkbox"/> State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">22426.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount <span style="float:right">500.00</span>
City State Zip Code WOODSTOCK GA 30189	<b>Transaction ID : SE.243289</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 05 / 05 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type 001
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 <input type="checkbox"/> President <input type="checkbox"/> State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">33296.63</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE  
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount 250.00
City State Zip Code WOODSTOCK GA 30189	<b>Transaction ID : SE.255619</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 12 / 2014
Purpose of Expenditure SCRIPT WRITING	Category/Type 001
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: MS
Calendar Year-To-Date Per Election for Office Sought 11976.26	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>TPPCF STAFF</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328	Amount 500.00
City State Zip Code WOODSTOCK GA 30189	<b>Transaction ID : SE.259924</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2014
Purpose of Expenditure VIDEO PRODUCTION	Category/Type 001
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: MS
Calendar Year-To-Date Per Election for Office Sought 617580.17	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
06 / 20 / 2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
TPPCF STAFF
MEMO ITEM
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328
City WOODSTOCK State GA Zip Code 30189
Purpose of Expenditure SCRIPT WRITING Category/Type 001
Date of Public Distribution/Dissemination 05/30/2014
Amount 500.00
Transaction ID : SE.259928
Date of Disbursement or Obligation 05/30/2014
Name of Federal Candidate SAMUEL CLOVIS Support Oppose
Office Sought: House Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 57060.00
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
TPPCF STAFF
MEMO ITEM
Mailing Address 2295 TOWNE LAKE PKWY. STE. 116-328
City WOODSTOCK State GA Zip Code 30189
Purpose of Expenditure WEB DEVELOPMENT Category/Type 001
Date of Public Distribution/Dissemination 05/15/2014
Amount 6187.50
Transaction ID : SE.255682
Date of Disbursement or Obligation 05/15/2014
Name of Federal Candidate THAD COCHRAN Support Oppose
Office Sought: House Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 25288.44
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 06/20/2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
TWILIO INC.
[MEMO ITEM]
Mailing Address 548 MARKET ST. #14510
City SAN FRANCISCO State CA Zip Code 94105
Purpose of Expenditure ROBO CALLS Category/Type 001
Name of Federal Candidate GREGORY JOSEPH BRANNON
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 41978.12

Date of Public Distribution/Dissemination
05 / 05 / 2014
Amount 15.39
Transaction ID : SE.243290
Date of Disbursement or Obligation
05 / 05 / 2014
Office Sought: House District: 00
President Senate State: NC
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
TWILIO INC.
[MEMO ITEM]
Mailing Address 548 MARKET ST. #14510
City SAN FRANCISCO State CA Zip Code 94105
Purpose of Expenditure ROBO CALLS Category/Type 001
Name of Federal Candidate MATT LYNCH
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 32742.63

Date of Public Distribution/Dissemination
05 / 05 / 2014
Amount 6.21
Transaction ID : SE.243287
Date of Disbursement or Obligation
05 / 05 / 2014
Office Sought: House District: 14
President Senate State: OH
Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE
[Electronically Filed]
Date 06 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>TWILIO INC.</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 12 / 2014</b>
Mailing Address 548 MARKET ST. #14510	Amount <b>14.85</b>
City State Zip Code SAN FRANCISCO CA 94105	<b>Transaction ID : SE.255621</b>
Purpose of Expenditure ROBO CALLS	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 12 / 2014</b>
Name of Federal Candidate BENJAMIN E SASSE	Category/Type <b>001</b>
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>21500.94</b>	

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>05 / 05 / 2014</b>
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount <b>1077.94</b>
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243283</b>
Purpose of Expenditure ROBO CALLS	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>05 / 05 / 2014</b>
Name of Federal Candidate GREGORY JOSEPH BRANNON	Category/Type <b>001</b>
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>41462.73</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE* [Electronically Filed] Date **06 / 20 / 2014**

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 06 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount 1077.94
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243303</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 06 / 2014
Purpose of Expenditure ROBO CALLS	Category/Type 001
Name of Federal Candidate GREGORY JOSEPH BRANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: NC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	44110.06

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 04 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount 1077.94
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243278</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2014
Purpose of Expenditure TELEMARKETING	Category/Type 001
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: 14 <input type="checkbox"/> President    State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	24504.88

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>	

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 05 / 04 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount <span style="border: 1px solid black; padding: 2px;">932.22</span>
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243279</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 05 / 04 / 2014
Purpose of Expenditure LIST ACQUISITION	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">25437.10</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 05 / 05 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount <span style="border: 1px solid black; padding: 2px;">5799.32</span>
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243285</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 05 / 05 / 2014
Purpose of Expenditure ROBO CALLS	Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">32236.42</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
06 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: VICTORY MEDIA GROUP
Mailing Address: 1701 EAST LAKE AVE. STE. 335
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Expenditure: PRINTING Category/Type: 001
Date of Public Distribution/Dissemination: 05/14/2014
Amount: 3936.53
Transaction ID: SE.255686
Date of Disbursement or Obligation: 05/28/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X] Oppose: [ ]
Office Sought: [ ] President [X] Senate
District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought: 18492.79
Disbursement For: [X] Primary [ ] General 2014

Full Name of Payee: VICTORY MEDIA GROUP
Mailing Address: 1701 EAST LAKE AVE. STE. 335
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Expenditure: PRINTING Category/Type: 001
Date of Public Distribution/Dissemination: 05/23/2014
Amount: 2002.61
Transaction ID: SE.259831
Date of Disbursement or Obligation: 05/23/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X] Oppose: [ ]
Office Sought: [ ] President [X] Senate
District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought: 610275.41
Disbursement For: [X] Primary [ ] General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 5939.14
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MR. PAULA KILGORE [Electronically Filed] Date: 06/20/2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount 5779.32
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243259</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2014
Purpose of Expenditure ROBO CALLS	Category/Type 001
Name of Federal Candidate THOM R TILLIS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: NC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	33785.39

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount 5099.40
City State Zip Code GLENVIEW IL 60025	<b>Transaction ID : SE.243260</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2014
Purpose of Expenditure LIST ACQUISITION	Category/Type 001
Name of Federal Candidate THOM R TILLIS	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: 00 <input type="checkbox"/> President    State: NC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	38884.79

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
06 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY PATRIOTS CITIZENS FUND
FEC IDENTIFICATION NUMBER
C C00540898
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
VICTORY MEDIA GROUP
Mailing Address
1701 EAST LAKE AVE.
STE. 335
City
GLENVIEW State
IL Zip Code
60025
Purpose of Expenditure
DIRECT MAIL PRODUCTION
Category/
Type
001
Name of Federal Candidate
THAD COCHRAN
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
522584.22

Date of Public Distribution/Dissemination
05 / 20 / 2014
Amount
111469.16
Transaction ID : SE.259817
Date of Disbursement or Obligation
05 / 21 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
VICTORY MEDIA GROUP
Mailing Address
1701 EAST LAKE AVE.
STE. 335
City
GLENVIEW State
IL Zip Code
60025
Purpose of Expenditure
DIRECT MAIL PRODUCTION
Category/
Type
001
Name of Federal Candidate
THAD COCHRAN
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
608272.80

Date of Public Distribution/Dissemination
05 / 23 / 2014
Amount
56044.58
Transaction ID : SE.259828
Date of Disbursement or Obligation
05 / 22 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 167513.74
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
MR. PAULA KILGORE
[Electronically Filed]
Date 06 / 20 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY PATRIOTS CITIZENS FUND</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00540898
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>VICTORY MEDIA GROUP</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 24 / 2014</b>
Mailing Address 1701 EAST LAKE AVE. STE. 335	Amount <b>3734.76</b>
City: GLENVIEW    State: IL    Zip Code: 60025	<b>Transaction ID : SE.259832</b>
Purpose of Expenditure ROBO CALLS AND DATA	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 24 / 2014</b>
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: House    District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <b>614010.17</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City:    State:    Zip Code:	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>605866.51</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*MR. PAULA KILGORE*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
**06 / 20 / 2014**