Image# 14970729913 PAGE 1 / 7

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Use	Only
NAME OF TOO COMMITTEE (in full)	YPE OR PRINT <b>T</b>		mple: If typir r the lines.	ng, type	12FE4M	5	
Electric Power Associati	ions of Missi	ssippi Action	Committe	e for Rur	al Electri	fication	
ADDRESS (number and street)	POST OFFICE BO	OX 3300					
Check if different							
than previously reported. (ACC)	Ridgeland MS					39158	
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦			STATE A	Z	IP CODE ▲
C C00004952		3. IS THIS REPORT		N) OR	\ \ \ \	MENDED A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)  Mar 20 (M3)		May 20 (M5)	-	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:				` ,	H	•	(Non-Election Year Only)
April 15 Quarterly Report (Q1)	)	Apr 20 (M4)		Jul 20 (M7)		t 20 (M10)	Jan 31 (YE)
X July 15 Quarterly Report (Q2)	(c) 12-Day PRE-EI		Primary (12P Convention (		Genera Special	, ,	Runoff (12R)
October 15 Quarterly Report (Q3)	· ·		(	0,	oposia.	(.=0)	
January 31 Year-End Report (YE)		Election on	M = M /	D D /	Y I Y I Y I		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		Election for the:	General (300	à)	Runoff	(30R)	Special (30S)
Termination Report (TER)	, itapan	Election on	M = M /	D D /	Y		in the State of
5. Covering Period 04	01	2014	through	M M	30	2014	
I certify that I have examined this	Report and to the	e best of my kno	wledge and b	pelief it is tru	e, correct a	nd complete	).
Type or Print Name of Treasurer	Mr. Michael - Cal	lahan					
Signature of Treasurer Mr. Mic	chael - Callahan		[Electronically	Filed]	eate 08	M / D 26	2014
NOTE: Submission of false, erroneo	us, or incomplete	information may su	bject the pers	son signing th	nis Report to	the penalties	s of 2 U.S.C. §437g.
Office Use Only							FORM 3X v. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### Electric Power Associations of Mississippi Action Committee for Rural Electrification

2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 91627.55 January 1, 2014 (b) Cash on Hand at 81627.55 Beginning of Reporting Period..... 238.26 238.26 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 81865.81 91865.81 6(a) and 6(c) for Column B)..... 5000.00 15000.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 76865.81 76865.81 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### Electric Power Associations of Mississippi Action Committee for Rural Electrification

	COLUMN A	COLUMN B
I. Receipts	Total This Period	Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	3
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	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 Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	0.00	0.00
. Transfers From Affiliated/Other		220.00
Party Committees	238.26	238.26
. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(IIOIII Ochedule 110)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
() T : 1 T ( ( 11 (2) ) 1 (2))	200	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	238.26	238.26
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	238.26	238.26

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
. Operating Expenditures: – (a) Allocated Federal/Non-Federal		Calchan Tour-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) Non Fodoval Chara	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
Expenditures	0.00	0.00	
(c) Total Operating Expenditures			
(add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00	
Transfers to Affiliated/Other Party			
Committees Contributions to	0.00	0.00	
Federal Candidates/Committees and Other Political Committees	5000.00	15000.00	
Independent Expenditures	0.00	0.00	
(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(use deficable 1)			
Loan Repayments Made	0.00	0.00	
Loans Made	0.00	0.00	
Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
i i			
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees		0.00	
(such as PACs)	0.00	0.00	
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Other Disbursements	0.00	0.00	
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	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5000.00	15000.00	
. , , , , , , , , , , , , , , , , , , ,	7	1000.00	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	5000.00	15000.00	

#### **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)	0.00	0.00		
34. Total Contribution Refunds				
(from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans)				
(subtract Line 34 from Line 33)	0.00	0.00		
6. Total Federal Operating Expenditures				
(add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00		
7. Offsets to Operating Expenditures				
(from Line 15, page 3)	0.00	0.00		
88. Net Operating Expenditures				
(subtract Line 37 from Line 36)	0.00	0.00		

#### SCH ITEN

lmage# 14970729918			
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 7 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)  Electric Power Associations of	Mississipp	oi Action Committee fo	Rural Electrification
Full Name (Last, First, Middle Initial) ACTION COMMITTEE. FOR RURAL ELECTRIFICATION	N. (ACRE) NATION	IAL RURAL ELECTRIC COOPERATIVE	Date of Receipt
Mailing Address 4301 Wilson Boulevard .			06 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Arlington	State VA	Zip Code 22203	Transaction ID : SA12.5711  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0002972	238.26
Name of Employer	Occupation		Transfer from Affiliate
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.26	
Full Name (Last, First, Middle Initial)  3.			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address	Stata	7in Code	M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation		

Aggregate Year-to-Date ▼

FEC Schedule A (Form 3X) Rev. 02/2003

238.26

Receipt For:

Primary

Other (specify) ▼

General

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

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

В.

C.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTER (in Full)  Electric Power Associations of Mississispipi Action Committee for Rural Electrification  Full Name (Last, First, Middle Initial)  City State Zip Code MS 38802  Fransaction ID: SB23.5710  Amount of Each Disbursement this Period Category' Type  Office Sought: House Primary General Primary General State: District  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Primary General Primary General State: District  Full Name (Last, First, Middle Initial)  Date of Disbursement  Candidate Name  Office Sought: House Disbursement For: 2014  Amount of Each Disbursement this Period Category' Type  Office Sought: House Disbursement For: Category' Type  Office Sought: House Disbursement Primary General Primary General Primary General Disbursement This Period Category' Type  Office Sought: House Disbursement Candidate Name  Office Sought: House Disbursement For: Category' Type  Office Sought: House Disbursement For: Senate Primary General Disbursement This Period Category' Type  Office Sought: House Disbursement For: Senate Primary General Primary Gene	SCHEDULE B (FEC Form 3X)	Han annuals selected (A	FOR LINE	NUMBER:	PAGE 7 OF 7
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 Pull)  Electric Power Associations of Mississippi Action Committee for Rural Electrification  Full Name (Last, First, Middle Initial)  A. Citizens for Cochran CITIZENS FOR COCHRAN  Malling Address PO BOX 7183  City State Zip Code TUPELD MS 38802  Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Primary General Full Name (Last, First, Middle Initial)  Malling Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Primary General  President Other (specify) ▼  Full Name (Last, First, Middle Initial)  Category'  Type  Office Sought: House Primary General  President Other (specify) ▼  Full Name (Last, First, Middle Initial)  Category'  Type  Office Sought: House Primary General  President Other (specify) ▼  Full Name (Last, First, Middle Initial)  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement This Period  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement This Period  Category'  Type  Other (specify) ▼  State: Zip Code  Purpose of Disbursement This Period  Category'  Type  Other (specify) ▼  State: Zip Code	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 🗶 23	
NAME OF COMMITTEE (in Full)  Electric Power Associations of Mississippi Action Committee for Rural Electrification  Full Name (Last, First, Middle Initial)  A. Citizens for Cochran CITIZENS FOR COCHRAN  Malling Address PO BOX 7183  City State Zip Code MS 38802  Transaction ID : SB23.5710  Amount of Each Disbursement Contribution  Candidate Name  Category/ Type  Full Name (Last, First, Middle Initial)  Malling Address  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Disbursement  Candidate Name  Category/ Type  Full Name (Last, First, Middle Initial)  Malling Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Category/ Category/ Type  C					
A. Citizens for Cochran CITIZENS FOR COCHRAN  Mailing Address PO BOX 7183  City State Zip Code MS 38802  Transaction ID : SB23.5710  Prupose of Disbursement Controlution  Candidate Name  Category/ Sitate: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Transaction ID : SB23.5710  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement ID : SB23.5710  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Disbursement  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Category/ Type  Disbursement  Candidate Name  Category/ Type  Disbursement  Disbursement For:  Senate Primary General	NAME OF COMMITTEE (In Full)	•			
Mailing Address PO BOX 7183  City State Zip Code MS 38802  Pripose of Disbursement Contribution  Candidate Name  Office Sought: House Senate Primary General Primary General President Coher (specify) ▼  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Type  Office Sought: House Disbursement For: 2014  Senate Primary General Primary General Primary General Primary General President Coher (specify) ▼  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: President Disbursement For: Date of Disbursement Type  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement Type  Office Sought: House Disbursement For: Senate Primary General Disbursement Disbursement Disbursement Disbursement For: Senate Primary General Disbursement Disbursem	,				
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Contribution Candidate Name  Category/ Type  Senate Prissident State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Sonate President  Date of Disbursement this Period  Category/ Type  Date of Disbursement this	TUPELO			Transaction ID:	SB23.5710
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Office Sought:	Candidate Name				5000.00
B.   Date of Disbursement	Senate	Primary General			
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/  Type  Date of Disbursement this Period  Amount of Each Disbursement  Category/  Type  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General  Office Sought: House Primary General  Office Sought: House Primary General  Office Sought: Disbursement For:  Senate Primary General  Office Sought: House Senate Primary General  Office Sought: House Disbursement For:  State: District: Sought: Primary General  Office Sought: House Primary General  Office Sought: House Senate Primary Genera	State: District:				
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement  Category/ Type  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate Primary General Other (specify) ▼  Substract: Senate Primary General Other (specify) ▼  Substract: District: Sought: President State: District: Sought: President State: District: Sought: Sought	Full Name (Last, First, Middle Initial) <b>B.</b>				ent
Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Other (specify)   Other (specify)   State: District:  Substock  Substock  Substock  Substock  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Other (specify)   Substock  Substock  Substock  Substock  Substock  Substock  Substock  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Other (specify)   Substock  Subst	Mailing Address			M = M / D = D	7
Candidate Name    Category/ Type	City	tate Zip Code			
Office Sought: House Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  Office Sought: House Office Senate Primary General Other (specify) Type  State: District:  Substract  Substract  Disbursement For: General Other (specify) Type  State: District: 5000.00	Purpose of Disbursement		· · ·	Amount of Each Di	sbursement this Period
State:  District:  C.  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought:  House Senate Primary General  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  Senate Primary General Other (specify)  Tippe  State:  District:  Substitute:  S	Candidate Name				
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Substotal of Disbursements This Page (optional)	Senate	Primary General			
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President State: District:  Substrict: Formula Substrict State: Disbursement This Page (optional)					
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Substotal of Disbursements This Page (optional)	C.				_
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Substitute Substitute State Substitute State Substitute State Substitute State Substitute State Substitute	Mailing Address				
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Substruct: Substruct: 5000.00	City	tate Zip Code			
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	Purpose of Disbursement				
Office Sought: House Senate Primary General Other (specify)  State: District:  Substitution: State Senate Primary General Other (specify)   State: District: 5000.00	Candidate Name				
CODITIONAL OF DISBURSCHICHES THIS Fage (optional)	Senate President	Primary General			
CODITIONAL OF DISBURSCHICHES THIS Fage (optional)	SUBTOTAL of Dishursements This Page (ontional)				5000.00
	OUDTOTAL OF DISDUTS ETHER THIS FAGE (OPHORIAI)		<u> </u>		5000.00