

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

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"/>		35704.59
(b) Cash on Hand at Beginning of Reporting Period.....	61882.45	
(c) Total Receipts (from Line 19)	4000.00	41295.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	65882.45	77000.45
7. Total Disbursements (from Line 31).....	13550.23	24668.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	52332.22	52332.22
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

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).....	4000.00	37650.00
(ii) Unitemized	0.00	3425.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4000.00	41075.00
(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)	4000.00	41075.00
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	220.86
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))..... ▶	4000.00	41295.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4000.00	41295.86

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	300.23	1418.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	300.23	1418.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13250.00	23250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13550.23	24668.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13550.23	24668.23

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)	4000.00	41075.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000.00	41075.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	300.23	1418.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	220.86
38. Net Operating Expenditures (subtract Line 37 from Line 36)	300.23	1197.37

**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 12
(check only one)

<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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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)
UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

A. Sandra R.A. Karrmann
Full Name (Last, First, Middle Initial)

Mailing Address 2408 Hollow Hill Lane

City Lewisville State TX Zip Code 75056

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

Name of Employer USPI Occupation Chief Human Resource Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 23 / 2014
Transaction ID : SA11AI.5016

Amount of Each Receipt this Period 1000.00

B. William H. Wilcox
Full Name (Last, First, Middle Initial)

Mailing Address 15305 Dallas Parkway Suite 1600

City Addison State TX Zip Code 75001

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

Name of Employer USPI Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 15 / 2014
Transaction ID : SA11AI.5018

Amount of Each Receipt this Period 3000.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	4000.00

**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)
UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Bank Of America

Date of Disbursement

Mailing Address Bank of America, N.A.

M M M	/	D D D	/	Y Y Y Y Y
07		15		2014

City Dallas State TX Zip Code 75283

Transaction ID : SB21B.5031

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

46.74

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Bank Of America

Date of Disbursement

Mailing Address Bank of America, N.A.

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

City Dallas State TX Zip Code 75283

Transaction ID : SB21B.5033

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

47.13

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Bank Of America

Date of Disbursement

Mailing Address Bank of America, N.A.

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

City Dallas State TX Zip Code 75283

Transaction ID : SB21B.5046

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

46.69

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

140.56

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)
UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TransFirst LLC

Mailing Address 1393 Veterans Memorial Highway
Suite 307S

City Hauppauge State NY Zip Code 11788

Purpose of Disbursement
Credit Card Processing Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : SB21B.5030

Amount of Each Disbursement this Period

16.40

Full Name (Last, First, Middle Initial)

B. TransFirst LLC

Mailing Address 1393 Veterans Memorial Highway
Suite 307S

City Hauppauge State NY Zip Code 11788

Purpose of Disbursement
Credit Card Processing Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB21B.5032

Amount of Each Disbursement this Period

139.27

Full Name (Last, First, Middle Initial)

C. TransFirst LLC

Mailing Address 1393 Veterans Memorial Highway
Suite 307S

City Hauppauge State NY Zip Code 11788

Purpose of Disbursement
Credit Card Processing Fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2014

Transaction ID : SB21B.5047

Amount of Each Disbursement this Period

4.00

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

159.67

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

300.23

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BILL CASSIDY FOR CONGRESS

Mailing Address 8550 UNITED PLAZA BLVD.
SUITE 1001

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement
Contribution

011

Candidate Name

WILLIAM CASSIDY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	4

Transaction ID : **SB23.5019**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. BRADY FOR CONGRESS

Mailing Address P.O. BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement
Contribution

011

Candidate Name

KEVIN BRADY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	4

Transaction ID : **SB23.5026**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JIM BRIDENSTINE INC

Mailing Address PMB 230
8086 SOUTH YALE

City TULSA State OK Zip Code 74136

Purpose of Disbursement
Contribution

011

Candidate Name

JAMES FREDERICK BRIDENSTINE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OK District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	4

Transaction ID : **SB23.5034**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

2	2	5	0	0	0	0	0	0	0

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

2	2	5	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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOE HECK		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address PO BOX 750114		Transaction ID : SB23.5013
City LAS VEGAS	State NV	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name JOE HECK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NV District: 03	

Full Name (Last, First, Middle Initial) B. FRIENDS OF MICHELLE		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address P.O. BOX 25422		Transaction ID : SB23.5010
City ALBUQUERQUE	State NM	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name MICHELLE LUJAN GRISHAM	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NM District: 01	

Full Name (Last, First, Middle Initial) C. GENE GREEN CONGRESSIONAL CAMPAIGN		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address PO BOX 16128		Transaction ID : SB23.5024
City HOUSTON	State TX	
Purpose of Disbursement Contribution	Category/ Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name RAYMOND E. 'GENE' GREEN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: TX District: 29	

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. LARSON FOR CONGRESS

Mailing Address PO BOX 261172

City HARTFORD State CT Zip Code 06126

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN B LARSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	4

Transaction ID : **SB23.5027**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. LONE STAR LEADERSHIP PAC

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
Contribution

011

Candidate Name

LONE STAR LEADERSHIP PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	4

Transaction ID : **SB23.5037**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

C. MARSHA BLACKBURN FOR CONGRESS, INC.

Mailing Address PO BOX 3750

City BRENTWOOD State TN Zip Code 37024

Purpose of Disbursement
Contribution

011

Candidate Name

MARSHA BLACKBURN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	4

Transaction ID : **SB23.5020**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

6	0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

6	0	0	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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UNITED SURGICAL PARTNERS INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. PETE SESSIONS FOR CONGRESS

Mailing Address PO BOX 823047

City DALLAS State TX Zip Code 75382

Purpose of Disbursement
Contribution

011

Candidate Name

PETE SESSIONS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2014

Transaction ID : **SB23.5021**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. ROGER WILLIAMS FOR U S CONGRESS COMMITTEE

Mailing Address P.O. BOX 91061

City AUSTIN State TX Zip Code 78709

Purpose of Disbursement
Contribution

011

Candidate Name

ROGER WILLIAMS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

Transaction ID : **SB23.5040**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. WYDEN FOR SENATE

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Contribution

011

Candidate Name

RONALD L WYDEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

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

Transaction ID : **SB23.5007**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

13250.00
