

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 JUL 15 AM 11:29

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
TURNER FOR NEW YORK

ADDRESS (number and street) PO BOX 140016
Check if different than previously reported. (ACC) HOWARD BEACH NY 11414

2. FEC IDENTIFICATION NUMBER ▼ C C00499244
3. IS THIS REPORT NEW OR AMENDED (N) (A)
CITY STATE ZIP CODE STATE ▼ DISTRICT
NY

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)
 Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 04 01 2013 through 06 30 2013

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 Kevin Turner
Signature of Treasurer Kevin Turner Date 7-11-13 07 11 2013

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

Office Use Only
FEC FORM 3
(Revised 02/2003)

13020274929

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TURNER FOR NEW YORK

Report Covering the Period: From: ^M04 / ^D01 / ^Y2013 To: ^M06 / ^D30 / ^Y2013

	COLUMN A This Period		COLUMN B Election Cycle-to-Date	
6. Net Contributions (other than loans)				
(a) Total Contributions (other than loans) (from Line 11(e))	,	,	0.00	749255.93
(b) Total Contribution Refunds (from Line 20(d))	,	,	0.00	34000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	,	,	0.00	715255.93
7. Net Operating Expenditures				
(a) Total Operating Expenditures (from Line 17)	,	,	0.00	871456.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	,	,	0.00	3125.09
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	,	,	0.00	868330.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	,	,	0.00	
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).....	,	,	153075.00	

For further information contact:

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

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

13020274930

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

TURNER FOR NEW YORK

Report Covering the Period: From: 04 01 2013 To: 06 30 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	504219.00
(ii) Unitemized	0.00	150944.61
(iii) TOTAL of contributions from individuals	0.00	655163.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	94092.32
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	749255.93
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	172500.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	172500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	3125.09
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	924881.02

13020274928

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period		COLUMN B Election Cycle-to-Date	
17. OPERATING EXPENDITURES.....	,	,	0.00	871456.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	,	,	0.00	0.00
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate.....	,	,	0.00	19425.00
(b) Of All Other Loans	,	,	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	,	,	0.00	19425.00
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees	,	,	0.00	34000.00
(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 20(a), (b), and (c)).....	,	,	0.00	34000.00
21. OTHER DISBURSEMENTS	,	,	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	,	,	0.00	924881.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	,	,	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	,	,	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	,	,	0.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	,	,	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	,	,	0.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : **SC/10.5684**

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** [PERSONAL FUNDS] Election: 2011
 Primary
 General
 Other (specify) ▼
 Special-General

Mailing Address
PO BOX 140016

City State ZIP Code
HOWARD BEACH NY 11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
\$ 20000.00	\$ 4425.00	\$ 15575.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 20 / 2011	12/31/11	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, .
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, .
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, .
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, .

SUBTOTALS This Period This Page (optional)..... ▶	\$ 15575.00
TOTALS This Period (last page in this line only)..... ▶	\$.

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274930

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : **SC/10.5685**

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** [PERSONAL FUNDS] Election: 2011
 Primary
 General
 Other (specify) ▼
 Special-General

Mailing Address
 PO BOX 140016

City State ZIP Code
 HOWARD BEACH NY 11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
\$ 15000.00	\$ 0.00	\$ 15000.00

TERMS Date Incurred Date Due Interest Rate Secured:

^M07 / ^D31 / ^Y2011 ^M / ^D / ^Y12/31/11 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, \$,
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, \$,
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, \$,
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$, \$,

SUBTOTALS This Period This Page (optional)..... ▶	\$ 15000.00
TOTALS This Period (last page in this line only)..... ▶	\$, \$,
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

13020274931

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : SC/10.5686

LOAN SOURCE Full Name (Last, First, Middle Initial) ROBERT L TURNER	<i>[PERSONAL FUNDS]</i>	Election: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General
Mailing Address PO BOX 140016		

City	State	ZIP Code
HOWARD BEACH	NY	11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
\$ 12500.00	\$ 0.00	\$ 12500.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M 08 / D 15 / Y 2011	M M / D D / Y 12/31/11	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$ \$.
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$ \$.
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$ \$.
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$ \$.

SUBTOTALS This Period This Page (optional)..... ▶	\$ \$ 12500.00
TOTALS This Period (last page in this line only)..... ▶	\$ \$.

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274922

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
TURNER FOR NEW YORK

Transaction ID : SC/10.5687

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2011

ROBERT L TURNER

Primary

General

Other (specify) ▼

Special-General

Mailing Address
PO BOX 140016

City State ZIP Code
HOWARD BEACH NY 11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred: M 08 / D 20 / Y 2011
Date Due: M M / D D / Y 12/31/11
Interest Rate: 0.00 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle, Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ▶ 3000.00

TOTALS This Period (last page in this line only) ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274923

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : **SC/10.11215**

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** [PERSONAL FUNDS] Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 140016

City	State	ZIP Code
HOWARD BEACH	NY	11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS Date Incurred **05 / 31 / 2012** Date Due **12/31/12** Interest Rate **0.00** % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	▶	30000.00
TOTALS This Period (last page in this line only).....	▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274937

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : SC/10.11479

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** [PERSONAL FUNDS] Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 140016

City	State	ZIP Code
HOWARD BEACH	NY	11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
\$ 30000.00	\$ 0.00	\$ 30000.00

TERMS Date Incurred **07 / 29 / 2012** Date Due **12/31/12** Interest Rate **0.00** % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$.
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$.
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$.
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: \$.

SUBTOTALS This Period This Page (optional).....	\$ 30000.00
TOTALS This Period (last page in this line only).....	\$.

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274938

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : SC/10.11478

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** [PERSONAL FUNDS]

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 140016

City	State	ZIP Code
HOWARD BEACH	NY	11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 26 / 2012	12/31/12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	▶	20000.00
TOTALS This Period (last page in this line only).....	▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274939

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
TURNER FOR NEW YORK

Transaction ID : SC/10.11469

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]**
ROBERT L TURNER

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 140016

City State ZIP Code
HOWARD BEACH NY 11414

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
21000.00	0.00	21000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 ^M / 26 ^D / 2012 ^Y	12/31/12 ^Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 21000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274940

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TURNER FOR NEW YORK** Transaction ID : **SC/10.11470**

LOAN SOURCE Full Name (Last, First, Middle Initial) **ROBERT L TURNER** *[PERSONAL FUNDS]*

Mailing Address
PO BOX 140016

City State ZIP Code
HOWARD BEACH NY 11414

Election: 2012
 Primary
 General
 Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6000.00	0.00	6000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 ^M / 26 ^D / 2012 ^Y	12/31/12 ^Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	6000.00
TOTALS This Period (last page in this line only).....	153075.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13020274941

Mr. Kevin P. Turner
849 16503127 4942
Richmond Hill, NY 11418

SCREWMENDED
BY THE SENATE
POST OFFICE

Secretary of the Senate

Office of Public Records

P.O. Box 11578

Washington, D.C. 20013-7578

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark **X**

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

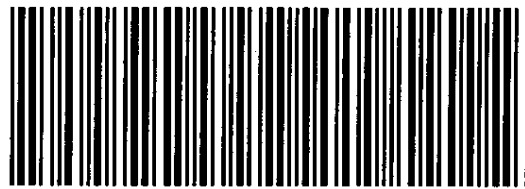
POSTMARK ILLEGIBLE NO POSTMARK **X**

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **7-15-13**

13020274943



13020274944