

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

14 OCT 17 AM 11:38

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4M5**
Wiesner for Senate Inc

ADDRESS (number and street) **6750 W 93rd**
Suite 220
Check if different than previously reported. (ACC) **Overland Park** **KS** **66212**

2. **FEC IDENTIFICATION NUMBER** **C** **C00563577**
3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**
CITY STATE ZIP CODE STATE DISTRICT
KS

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 _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **07 17 2014** through **09 30 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 **Kristy M Herl**

Signature of Treasurer **Kristy M Herl** Date **10 11 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.

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

14020981959

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 11

Write or Type Committee Name

Wiesner for Senate Inc

Report Covering the Period: From: ^M 07 ^D 17 / ^Y 2014 To: ^M 09 ^D 30 ^Y 2014

	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	2601.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	0.00	2601.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	10940.12	3223.70
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	10940.12	3223.70
8. Cash on Hand at Close of Reporting Period (from Line 27)...	2673.31	
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)...	48000.00	

For further information contact:

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

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

14020981970

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Wiesner for Senate Inc

Report Covering the Period: From: M M D D Y Y To: M M D D Y Y
07 17 2014 09 30 2014

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	500.00
(ii) Unitemized.....	0.00	101.00
(iii) TOTAL of contributions from individuals .	0.00	601.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) The Candidate	0.00	2000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	2601.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	42000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	42000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	480.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...		
	480.00	44601.00

14020981971

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	10940.12	3223.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. 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 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10940.12	3223.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	13133.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	480.00
25. SUBTOTAL (add Line 23 and Line 24)...	13613.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	10940.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2673.31

14020981972

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Wiesner for Senate Inc

A. Full Name (Last, First, Middle Initial)
Lawrence Journal World

Mailing Address **609 New Hampshire**

City **Lawrence** State **KS** Zip Code **66044**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt _____

Transaction ID : **SA15.4167**

Amount of Each Receipt this Period
480.00

Refund on Advertising _____

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) _____

Election Cycle-to-Date _____

Date of Receipt _____

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) _____

Election Cycle-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional)..... **480.00**

TOTAL This Period (last page this line number only)..... **480.00**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 11

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Wiesner for Senate Inc

Full Name (Last, First, Middle Initial) A. Cassaw Creative		Date of Disbursement M M D D Y Y Y Y 07 30 2014
Mailing Address 10607 W 50th Terrace		Amount of Each Disbursement this Period 3050.00 Transaction ID : SB17.4165
City Shawnee State KS Zip Code 66203	Category/ Type 004	
Purpose of Disbursement Advertising		Candidate Name Wiesner for Senate Inc
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS District:		

Full Name (Last, First, Middle Initial) B. Lamar Advertising Co		Date of Disbursement M M D D Y Y Y Y 07 30 2014
Mailing Address 7108 E 48th		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.4164
City Kansas City State MO Zip Code 64129	Category/ Type 004	
Purpose of Disbursement Advertising		Candidate Name Wiesner for Senate Inc
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS District:		

Full Name (Last, First, Middle Initial) C. Lawrence Journal World		Date of Disbursement M M D D Y Y Y Y 07 21 2014
Mailing Address 609 New Hampshire		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.4157
City Lawrence State KS Zip Code 66044	Category/ Type 004	
Purpose of Disbursement Advertising		Candidate Name Wiesner for Senate Inc
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS District:		

SUBTOTAL of Disbursements This Page (optional)..... 5500.00

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

14020981974

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Wiesner for Senate Inc

Full Name (Last, First, Middle Initial) A. Lawrence Journal World		Date of Disbursement M M D D Y Y Y Y 07 21 2014	
Mailing Address 609 New Hampshire		Amount of Each Disbursement this Period 971.25	
City Lawrence	State KS	Zip Code 66044	Transaction ID : SB17.4158
Purpose of Disbursement Advertising		004 Category/ Type	
Candidate Name Wiesner for Senate Inc		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: KS	District:		

Full Name (Last, First, Middle Initial) B. Lawrence Journal World		Date of Disbursement M M D D Y Y Y Y 07 21 2014	
Mailing Address 609 New Hampshire		Amount of Each Disbursement this Period 971.25	
City Lawrence	State KS	Zip Code 66044	Transaction ID : SB17.4159
Purpose of Disbursement Advertising		004 Category/ Type	
Candidate Name Wiesner for Senate Inc		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: KS	District:		

Full Name (Last, First, Middle Initial) C. Lawrence Journal World		Date of Disbursement M M D D Y Y Y Y 07 21 2014	
Mailing Address 609 New Hampshire		Amount of Each Disbursement this Period 0.00	
City Lawrence	State KS	Zip Code 66044	Transaction ID : SB17.4160
Purpose of Disbursement Advertising		004 Category/ Type	
Candidate Name Wiesner for Senate Inc		Disbursement For: 2014	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: KS	District:		

SUBTOTAL of Disbursements This Page (optional).....	1942.50
TOTAL This Period (last page this line number only).....	

14020981975

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Wiesner for Senate Inc

A. Lawrence Journal World Full Name (Last, First, Middle Initial) Mailing Address 609 New Hampshire City Lawrence State KS Zip Code 66044 Purpose of Disbursement Advertising Candidate Name Wiesner for Senate Inc Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: KS District:		Date of Disbursement M M D D Y Y 07 31 2014 Amount of Each Disbursement this Period 525.00 Transaction ID : SB17.4166
B. The Salina Journal Full Name (Last, First, Middle Initial) Mailing Address 333 S 4th City Salina State KS Zip Code 67401 Purpose of Disbursement Advertising Candidate Name Wiesner for Senate Inc Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: KS District:		Date of Disbursement M M D D Y Y 07 17 2014 Amount of Each Disbursement this Period 2700.50 Transaction ID : SB17.4153
c. The Salina Journal Full Name (Last, First, Middle Initial) Mailing Address 333 S 4th City Salina State KS Zip Code 67401 Purpose of Disbursement Advertising Candidate Name Wiesner for Senate Inc Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: KS District:		Date of Disbursement M M / J D / Y Y Y Y 09 16 2014 Amount of Each Disbursement this Period 157.50 Transaction ID : SB17.4152
SUBTOTAL of Disbursements This Page (optional)		3383.00
TOTAL This Period (last page this line number only)		10825.50

14020981976

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)
Wiesner for Senate Inc

Transaction ID : **SC/10.4107**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]**
Patrick Wiesner

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
2717 Ann Court

City State ZIP Code
Lawrence KS 66046

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05/07/2014	12/15/2014	4.00 % (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)...	▶	2000.00
TOTALS This Period (last page in this line)...	▶	

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

14020981977

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)
Wiesner for Senate Inc

Transaction ID : SC/10.4108

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

Patrick Wiesner

[PERSONAL FUNDS]

Election: 2014

Primary

General

Other (specify) ▼

Mailing Address
2717 Ann Court

City State ZIP Code
Lawrence KS 66046

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 ^M 27 ^D 2014	12/15/2014	4.00 % (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)... 40000.00

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.

14020981978

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) **Wiesner for Senate Inc** Transaction ID : **SC/10.4142**

LOAN SOURCE Full Name (Last, First, Middle Initial) Patrick Wiesner	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2717 Ann Court		
City Lawrence	State KS	ZIP Code 66046

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

TERMS	Date Incurred M 07 D 15 Y 2014	Date Due Y 12 M 15 Y 2014	Interest Rate 4.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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) ..	48000.00

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

14020981979

PRESS FIRMLY

NOON DELIVERY

PRESS FIRMLY TO SEAL



SHANNEE MISSION, KS
OCT 14 14
1007
\$19.99
000790-40-08

PRIORITY MAIL EXPRESS™
OUR FASTEST SERVICE IN THE U.S.



WHEN USED INTERNATIONALLY
A CUSTOMS DECLARATION
LABEL MAY BE REQUIRED.



PS 10001000006

EP13F July 2013 OD:12.5 X 9.5

WRITE FIRMLY TO MAKE ALL COPIES LEGIBLE.

CUSTOMER USE ONLY

FROM: (please print) PHONE: ()

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

- SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the addressee requires the addressee's signature. (08 2) Purchase additional insurance. (08 3) Purchase COD service. (08 4) mail receipts or other access service. If the box is not checked, the Postal Service will leave the item in the addressee's Delivery Options.
- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery (required additional fee, where available)
- 10:30 AM Delivery (required additional fee, where available)
- Trailer to USPS sort & load Post Office (if available)

TO: (please print) PHONE: ()

ZIP+4® (U.S. ADDRESSES ONLY)
20510

For pickup or USPS Tracking™, visit usps.com
\$100.00 Insurance Included.

POST 15 2014



EK590659044US

TIONAL USE



PRIORITY MAIL EXPRESS™

ORIGIN (POSTAL SERVICE USE ONLY)

1-Day 2-Day Priority UPO

PO ZIP Code 61212 Scheduled Delivery Date (MM/DD/YYYY) 10/15/2014 Postage \$19

Date Accepted (MM/DD/YYYY) 10/14/2014 Scheduled Delivery Time 10:30 AM 3:00 PM 12 NOON Insurance Fee \$

Weight 958 lbs oz 6 AM PM 10:30 AM Delivery Fee Return Receipt Fee Live Annual Transportation Fee

Par Rate Surcharge/Premium Fee \$ Total Package & Fees \$19.99

Accompanying Employee Initials \$

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature

Delivery Attempt (MM/DD/YYYY) Time AM PM Employee Signature

LABEL 11-4, JANUARY 2014

PSN 7800-02-300-9996

3-ADDRESSEE COPY

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08618602071

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

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 10/14/14 _____
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

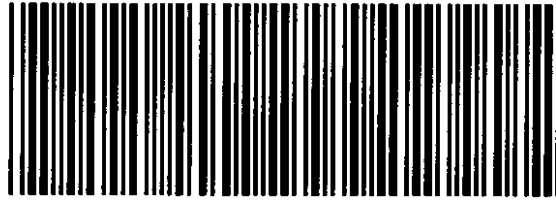
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

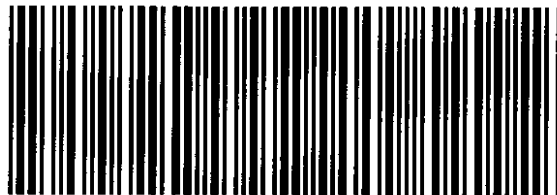
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 10/17/14

14020981981



SEN PATCH



SEN PATCH

14020981982