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FEC FORM 3

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## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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**FEC FORM 3** 

(Revised 02/2003)

| NAME OF COMMITTEE (in full)  | TYPE OR PRINT                           |                 | kample: If typing<br>ver the lines.             | type 1            | L2FE4M5 <sup>FE</sup>       | CMAIL CENT                     | ER    |
|--|---|-----------------|---|-------------------|-----------------------------|--------------------------------|-------|
|  |   | or Cor          | noress  |                   | AMENDED (A)                 | 834-LI<br>ZIP CODE STATE ▼ DIS |       |
| 4. TYPE OF REPORT (Ch  (a) Quarterly Reports:  April 15 Quarterly F  July 15 Quarterly F  October 15 Quarter  January 31 Year-Er | Report (Q1) Report (Q2) rly Report (Q3) | Election on     | E-Election Report Primary (12P)  Convention (12 | t for the:<br>2C) | General (12G) Special (12S) | Runoff (                       | 12R)  |
| Termination Report   |   | Election on     | General (30G)                                   |                   | Runoff (30R)                | Special in the State of        | (308) |
| ·····  | 4'01'                                   |                 | through   |                   | 15'20                       |                                |       |
| Type or Print Name of Treasurer  Signature of Treasurer  | Lower P                                 | n Pia<br>Lano   | no  | Date              | , 05′                       | 1,9 / 20                       | 14    |
| NOTE: Submission of false, erron   | eous, or incomplete                     | information may | subject the person                              | on signing this   | Report to the per           | nalties of 2 U.S.C. §          | 437g. |

#### FEC Form 3 (Revised 02/2003)

## **SUMMARY PAGE**

of Receipts and Disbursements

Page 2

Write or Type Committee Name on For Conbicss 2014 INC

Report Covering the Period:

01'2014 To: 05'1"5'2014

|     |   | COLUMN A<br>This Period                 | COLUMN B Election Cycle-to-Date  |
|-----|---|---|--|
| 6.  | Net Contributions (other than loans)  |   |  |
|     | (a) Total Contributions (other than loans) (from Line 11(e))                              | a93500                                  |  |
|     | (b) Total Contribution Refunds (from Line 20(d))  | , ,                                     | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;  |
|     | (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))              | , 293.500                               | · a  |
| 7.  | Net Operating Expenditures  |   |  |
|     | (a) Total Operating Expenditures (from Line 17)   | 521800                                  | a de la companya de l |
|     | (b) Total Offsets to Operating Expenditures (from Line 14)                                | , | F. F. F. F. F.   |
|     | (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))                        | , 5,218.00                              | и к .<br>7 и У И "   |
| 8.  | Cash on Hand at Close of Reporting Period (from Line 27)                                  | 23,056.00                               | •  |
| 9.  | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | ,                                       |  |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Sohedule D) | · , , , , , , , , , , , , , , , , , , , |  |

#### 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 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

## Rich Van Glahn For Congress 2014 Inc

Report Covering the Period:

From:

04'01'2014

то: 05' 15' 2014

| I. RECEIPTS  11. CONTRIBUTIONS (other than loans) FROM:   |   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date   |  |  |
|---|---|-------------------------------|--|--|--|
|   |   |                               |  |  |  |
|   | (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) | 1,25000                       | , 1557500  |  |  |
|   | (ii) Unitemized   | , 1,685.00<br>293500          | , 42,236.00  |  |  |
|   | (b) Polltical Party Committees  |                               |  |  |  |
|   | (d) The Candidate   | , 2,935.00                    | , aa,a3,b.00   |  |  |
| 12.   | TRANSFERS FROM OTHER AUTHORIZED COMMITTEES  |                               | . It was a second of the secon |  |  |
| 13.   | LOANS: (a) Made or Guaranteed by the Candidate  |                               | , 8,50,000   |  |  |
|   | (b) All Other Loans   |                               | 850000   |  |  |
| 14.   | OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)                            |                               |  |  |  |
| 15.   | OTHER RECEIPTS (Dividends, Interest, etc.)  |                               | 1  |  |  |
| 16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) |   | , 2935.00                     | 30,736.00  |  |  |

#### **DETAILED SUMMARY PAGE**

of Disbursements FEC Form 3 (Revised 02/2003) Page 4 **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 521800 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees ..... (b) Political Party Committees..... Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)......

(subtract Line 26 from Line 25).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

5.21,8.00

, 23,05600



## SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE OF (check only one) Use separate schedule(s) for each category of the

| HEMIZED RECEIPTS   | Detailed Summary Page                 | 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)  PICK Van Glahn Fol  | r Longress 2                          | 2014 Inc  |  |  |
| Full Name (Last, First, Middle Initial)  A. Mailing Address  Address   |                                       | Date of Receipt   |  |  |
| City Oarta. Since  | Zip Code                              | 04/03/2014  |  |  |
| FEC ID number of contributing federal political committee.   | 07017                                 | Amount of Each Receipt this Period  |  |  |
| Name of Employer  Self-employed  Receipt For:  Receipt For:  Receipt For:  Receipt For:  | L.Drives a Control                    |   |  |  |
| Primary General Other (specify)  | , , , , , , , , , , , , , , , , , , , |   |  |  |
| Eull Name (Last, First, Middle Initial)  B. Calinda, Rhonda-Tayl   | oe                                    | Date of Receipt   |  |  |
| Mailing Address  4 Hardin Court  City   State  | Zip Code                              | 04'03'2014  |  |  |
| chester ht   | 0430                                  |   |  |  |
| FEC ID number of contributing federal political committee.   | · · ·                                 | Amount of Each Receipt this Period  |  |  |
| BNE Real Estate CF   | <u>0</u>                              | · · · · · · · · · · · · · · · · · · ·   |  |  |
| Receipt For:  Primary General  Other (specify)   | ycle-to-Date<br>, 25000               |   |  |  |
| Full Name (Last, First, Middle Initial)  C. DUELLU, Frank  |                                       | Date of Receipt   |  |  |
| Mailing Address Highway 9<br>City State  | Zip Code                              | 04' 23' 2014  |  |  |
| TOWS RIVEY NJ FEC ID number of contributing  | 08755                                 |   |  |  |
| federal political committee.   |                                       | Amount of Each Receipt this Period  |  |  |
| Name of Employer  Nitchens by Flank Cor  Receipt For:  Election C  | Mactor                                | , , , , , , , , , , , , , , , , , , ,   |  |  |
| Primary General Other (specify)  | , ,500.00                             |   |  |  |
| SUBTOTAL of Receipts This Page (optional)  |                                       | , /,00000   |  |  |
| TOTAL This Period (last page this line number only)  |                                       | in the state of t |  |  |

#### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

PAGE FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 11a 11b 11d 11c **Detailed Summary Page** 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) Date of Receipt 05'09'2014 FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Occupation Name of Employer Receipt For: Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date **Primary** General Other (specify) to the Lynch Liver Law York SUBTOTAL of Receipts This Page (optional).....

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

| SCHEDULE B (FEC Form 3)   | Use separate schedule(s)                          | FOR LINE NUMBER: PAGE OF OF OF OCCUPANT OF OF OCCUPANT |
|---|---|--|
| ITEMIZED DISBURSEMENTS  | for each category of the<br>Detailed Summary Page | X   17   |
| Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a  |   |  |
| NAME OF COMMITTEE (In Full)  Rich Van Glahn Fo  | or Congres  | s 2014 INC.  |
| Full Name (Last, First, Middle Initial)  A. APOLLOTIVE  Mailing Address igner Avenue  City Denville State  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Disbursement For: | Zip Code 07834 OO 1 Category, Type                | Date of Disbursement  O 4 ' O4 ' 2014  Amount of Each Disbursement this Period  , 80000  |
| State: District: Other (sp. 1971)  B. NTNGAS  | pecify)   | Date of Disbursement   |
| Mailing Address  1415 Wyckoff Road  City State  Purpose of Dispursement  Candidate Name  Office Sought: House Disbursement For:   | Zip Code O77 19 Category, Type                    | Amount of Each Disbursement this Period , 248,58   |
| Senate Primary Other (sp  State: District:  Full Name (Last, First, Middle Initial)  C. Mailing Address   |   | Date of Disbursement  84 / 25 / 2014   |
| PO BOX 8802  City Ininaton DE Zin   | General   | Amount of Each Disbursement this Period  |
| SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)   |   | 4,333,49   |

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

NAME OF COMMITTEE (In Full)

PAGE FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 19b 18 19a **Detailed Summary Page** 20c 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. or Congress 2014 Date of Disbursement

|  |   |                   | <b></b>  |  |  |
|--|---|-------------------|--|--|--|
| City   | State Zip Code                                    |                   | Amount of Each Disbursement this Period  |  |  |
| Purpose of Disbursement                                | 2,597,00  |                   |  |  |  |
| Candidate Name   |   | Category/<br>Type |  |  |  |
| Office Sought: House Senate President                  | Disbursement For: Primary General Other (specify) |                   |  |  |  |
| State: District: Full Name (Last, First, Middle Initia | al)   |                   |  |  |  |
| Slimick St   |   |                   | Date of Disbursement   |  |  |
| Mailing Address  |   |                   | *  |  |  |
| City   | State Zip Code                                    | 7                 | Amount of Each Disbursement this Period  |  |  |
| Purpose of Disbursement                                | 31300   |                   |  |  |  |
| Candidate Name   |   | Category/         |  |  |  |
| Office Sought: House Senate President State: District: | Disbursement For: Primary General Other (specify) |                   |  |  |  |
| Full Name (Last, First, Middle Initia                  | al)   | <del></del>       |  |  |  |
| Buildasiar   | 1.00m   |                   | Date of Disbursement   |  |  |
| Mailing Address  |   |                   | a service of the serv |  |  |
| City State Zip Code  Purpose of Disbursement  Sign 5   |   |                   | Amount of Each Disbursement this Period  |  |  |
|  |   |                   | , ,250,91  |  |  |
| Candidate Name   |   | Category/<br>Type |  |  |  |
| Office Sought: House Senate President                  | Disbursement For: Primary General Other (specify) |                   |  |  |  |
| State: District:                                       |   |                   |  |  |  |
| UBTOTAL of Disbursements This F                        | Page (optional)                                   |                   |  |  |  |
| OTAL This Period (last page this li                    | ne number only)                                   |                   | in the second of |  |  |

C.

## SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: (check only one) PAGE 3 Use separate schedule(s)

| ITEMIZED DISBURSEMENTS   | Detailed Summary Page                         | 17<br>20a     | 18<br>20b                 | 19a<br>20c                   | 19b<br>21    |
|--|---|---------------|---------------------------|------------------------------|--------------|
| Any information copied from such Reports and Statements or for commercial purcoses, other than using the name an           |   |               |                           |                              |              |
| NAME OF COMMITTEE (In Full)  RICH Van Glahn For  | Congress 20                                   | 14 INC        | <u>.</u>                  |                              |              |
| Full Name (Last, First, Middle Initial)  A.   Mailing Address  City  Purpose of Disbersement  Office help  Constitute Name |   |               | ursement  D'  ach Disburs | み014<br>ement this F<br>1400 | Period       |
| State: District:   | <del>,</del>                                  |               |                           |                              |              |
| B. Mailing Address 15 Vans lane  |   | Date of Disbu |                           | 2014                         | 7            |
| Purpose of Disbursement  Office NetP  Candidate Name   | Zip Code<br>07470<br>001<br>Category/<br>Type | Amount of Ea  |                           | ement this F                 |              |
| Office Sought: House Disbursement F Senate President Other State: District:  |   |               |                           |                              |              |
| Full Name (Last, First, Middle Initial)  C. Mailing Address  The Vannes Lawe   |   | Date of Disbu |                           | راً 10C                      | <del>/</del> |
| Purpose of Disbursement Office help Candidate Name   | Zip Code                                      | Amount of Ea  | ach Disburs               | ement this F                 | Period       |
| Office Sought: House Disbursement F Senate President State: District:  | or:   |               |                           |                              |              |
| SUBTOTAL of Disbursements This Page (optional)   |   | ,             |                           | 1200                         | 20           |
| TOTAL This Period (last page this line number only)  |   | . <b>5</b>    |                           |                              | •            |

## 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)

17
18
19a
19a
19b
20a
20b
20c
21

| TEMIZED DIODOTIOEMENTO   | Detailed Summary Page                     | 20a 20b 20c 21  |
|--|---|---|
| Any information copied from such Reports and Stateme or for commercial purposes, other than using the name |   | erson for the purpose of soliciting contributions   |
|  | FOR Consicss.                             | 2014 INC  |
| Full Name (Last, First, Middle Initial)  A. Mailing Address Lone  City Number Sta                          | te Zip Code<br>T 07470                    | Date of Disbursement  05'01'2014  Amount of Each Disbursement this Period   |
| F ! F  | OO /<br>Category/<br>Type                 | 140,00  |
| State: District: Full Name (Last, First, Middle Initial)  B.   | (1)                                       | Date of Disbursement  |
| Mailing Address  |   | - M M / D D / Y Y Y   |
| City Sta   | Amount of Each Disbursement this Period   |   |
| Purpose of Disbursement  | . ;                                       | a sign of section   |
| Candidate Name   | Category/<br>Type                         |   |
|  | nt For: imary General her (specify)       |   |
| Full Name (Last, First, Middle Initial)  C.  |   | Date of Disbursement  |
| Mailing Address  |   | M M / D D / Y Y Y Y   |
| City State   | Zip Code                                  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement  |   | j to to the total of the total |
| Candidate Name   | Category/<br>Type                         |   |
|  | nt For:<br>imary General<br>her (specify) |   |
| SUBTOTAL of Disbursements This Page (optional)   |   | , 14000   |
| TOTAL This Period (last page this line number only)  |   | , 4,89349   |

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DATE PREPARED

(8/2013)