

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 15 JUL 15 PM 2:02

Office Use Only

1. NAME OF COMMITTEE (In full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Ted Cruz for Senate

ADDRESS (number and street)

815 A BRAZOS PMB 550

Check if different than previously reported. (ACC)

Austin

TX

78701

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C 000492785

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TX

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 MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY 04/01/2015

through

MM/DD/YYYY 06/30/2015

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

CAROL HOOPS ASSTANT TREASURER

Signature of Treasurer

Handwritten signature of Carol Hoops

Date

MM/DD/YYYY 07/15/2015

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)

201507150200184978

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Ted Cruz for Senate

Report Covering the Period: From: ^M04 ^D01 ^Y2015 To: ^M06 ^D30 ^Y2015

	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))...	7279.00	1955868.06
(b) Total Contribution Refunds (from Line 20(d)) ..	1400.00	199589.39
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	5879.00	1756278.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	130789.07	3757106.48
(b) Total Offsets to Operating Expenditures (from Line 14)...	146.38	23744.21
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	130642.69	3733362.27
8. Cash on Hand at Close of Reporting Period (from Line 27)...	416011.20	
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	

For further information contact:

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

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

201507150200184979

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Ted Cruz for Senate

Report Covering the Period: From: M M D D Y Y
04 01 2015

To: M M / D D / Y Y
06 30 / 2015

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)...	1479.00	972591.36
(ii) Unitemized.....	800.00	631447.81
(iii) TOTAL of contributions from individuals	2279.00	1604039.17
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ..	5000.00	351828.89
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7279.00	1955868.06
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	2385396.50
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	146.38	23744.21
15. OTHER RECEIPTS (Dividends, Interest, etc.)	8.98	12772.88
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	7434.36	4377781.65

201507150200184980

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	130789.07	3757106.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	510012.93
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	363000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	363000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	1400.00	127738.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	71851.39
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	1400.00	199589.39
21. OTHER DISBURSEMENTS ...	4600.00	6200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	136789.07	4835908.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	545365.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7434.36
25. SUBTOTAL (add Line 23 and Line 24) ...	552800.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	136789.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	416011.20

201507150200184981

**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)		PAGE 5 OF 130	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) MS. BETTY AMES		Date of Receipt M M D D / Y Y Y 05 21 / 2015
Mailing Address 1965 GALWAY DRIVE		Transaction ID : SA11.294606
City VIDOR	State TX	Zip Code 77662-2911
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	30.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		CONTRIBUTION
Election Cycle-to-Date		350.00

Full Name (Last, First, Middle Initial) CLIFFORD CAMERON CLOONAN		Date of Receipt M M D D / Y Y Y 04 16 / 2015
Mailing Address 83 ASHTON ST.		Transaction ID : SA11.255911
City CARLISLE	State PA	Zip Code 17015-9137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer PINNACLE HEALTH	Occupation PHYSICIAN	50.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		CONTRIBUTION
Election Cycle-to-Date		1800.00

Full Name (Last, First, Middle Initial) CLIFFORD CAMERON CLOONAN		Date of Receipt M M D D / Y Y Y 05 16 / 2015
Mailing Address 83 ASHTON ST.		Transaction ID : SA11.290894
City CARLISLE	State PA	Zip Code 17015-9137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer PINNACLE HEALTH	Occupation PHYSICIAN	50.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		CONTRIBUTION
Election Cycle-to-Date		1800.00

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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**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)	PAGE 6 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) CLIFFORD CAMERON CLOONAN		Date of Receipt M M D D Y Y 06 16 2015	
Mailing Address 83 ASHTON ST.		Transaction ID : SA11.315253	
City State Zip Code CARLISLE PA 17015-9137	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1800.00 CONTRIBUTION	
Name of Employer Occupation PINNACLE HEALTH PHYSICIAN	Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date , , 1800.00			

B. Full Name (Last, First, Middle Initial) ARLENE B. COSNER		Date of Receipt M M / D D / Y Y Y Y 04 16 2015	
Mailing Address 7525 RUNNINGBROOK COURT		Transaction ID : SA11.255914	
City State Zip Code INDIANAPOLIS IN 46254-9770	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 230.00 CONTRIBUTION	
Name of Employer Occupation RETIRED RETIRED	Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date , , 230.00			

C. Full Name (Last, First, Middle Initial) MS. JEAN M. DICKINSON		Date of Receipt M M D D Y Y 04 15 2015	
Mailing Address 609 5TH AVENUE W.		Transaction ID : SA11.254736	
City State Zip Code ROCK SPRINGS WY 82901-7621	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 700.00 CONTRIBUTION	
Name of Employer Occupation SELF-EMPLOYED FOOD PRODUCER	Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date , , 700.00			

SUBTOTAL of Receipts This Page (optional).....	, , 85.00
TOTAL This Period (last page this line number only).....	, ,

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

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

FOR LINE NUMBER: PAGE 7 OF 130
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial)
MS. JEAN M. DICKINSON

Mailing Address 609 5TH AVENUE W.

City State Zip Code
ROCK SPRINGS WY 82901-7621

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

Name of Employer Occupation
SELF-EMPLOYED FOOD PRODUCER

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D Y Y
05 / 15 2015

Transaction ID : SA11.288116

Amount of Each Receipt this Period
25.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. JEAN M. DICKINSON

Mailing Address 609 5TH AVENUE W.

City State Zip Code
ROCK SPRINGS WY 82901-7621

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

Name of Employer Occupation
SELF-EMPLOYED FOOD PRODUCER

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D Y Y
06 / 15 2015

Transaction ID : SA11.313787

Amount of Each Receipt this Period
25.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHERI H. DORBRITZ

Mailing Address 5262 N HOLMES RD

City State Zip Code
MARSHALL TX 75670-2313

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2018
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D Y Y
04 / 16 2015

Transaction ID : SA11.255912

Amount of Each Receipt this Period
10.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 60.00

TOTAL This Period (last page this line number only)

201507150200184984

**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)	PAGE 8 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) MR. JAMES B. EDWARDS			Date of Receipt M M / D D / Y Y Y 04 15 2015		
Mailing Address 12603 SW FREEWAY, STE. 200			Transaction ID : SA11.255963		
City STAFFORD	State TX	Zip Code 77477-3809	Amount of Each Receipt this Period , , 100.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 100.00 CONTRIBUTION		
Name of Employer SELF-EMPLOYED		Occupation ATTORNEY		Amount of Each Receipt this Period , , 100.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1400.00		Amount of Each Receipt this Period , , 100.00 CONTRIBUTION	

B. Full Name (Last, First, Middle Initial) MRS. CONNIE L. ELSAESSER			Date of Receipt M M / D D / Y Y Y 04 15 2015		
Mailing Address 4024 SWISS AVE			Transaction ID : SA11.254735		
City DALLAS	State TX	Zip Code 75204-6459	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		Amount of Each Receipt this Period , , 25.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 600.00		Amount of Each Receipt this Period , , 25.00 CONTRIBUTION	

C. Full Name (Last, First, Middle Initial) JAMES GARDNER			Date of Receipt M M / D D / Y Y Y 04 16 2015		
Mailing Address 1607 21ST AVE WEST			Transaction ID : SA11.255918		
City PALMETTO	State FL	Zip Code 34221-6166	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
Name of Employer LOWES		Occupation ASSOCIATE		Amount of Each Receipt this Period , , 50.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 375.00		Amount of Each Receipt this Period , , 50.00 CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional)	, , 175.00
TOTAL This Period (last page this line number only)	, ,

201507150200184985

**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)	PAGE 9 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) JAMES GARDNER		Date of Receipt M M / D D / Y Y 05 / 16 / 2015
Mailing Address 1607 21ST AVE WEST		Transaction ID : SA11.290898
City PALMETTO	State FL	Zip Code 34221-6166
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer LOWES	Occupation ASSOCIATE	50.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		375.00

B. Full Name (Last, First, Middle Initial) JAMES GARDNER		Date of Receipt M M / D D / Y Y 06 / 16 / 2015
Mailing Address 1607 21ST AVE WEST		Transaction ID : SA11.315258
City PALMETTO	State FL	Zip Code 34221-6166
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer LOWES	Occupation ASSOCIATE	50.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		375.00

C. Full Name (Last, First, Middle Initial) MR. CHRIS H. GORIS		Date of Receipt M M / D D / Y Y 05 / 22 / 2015
Mailing Address P.O. BOX 9196		Transaction ID : SA11.299716
City GLENDALE	State CA	Zip Code 91226-0196
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer JEANE RIPPON	Occupation APARTMENT MANAGER	50.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		550.00

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

201507150200184986

**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)	PAGE 10 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) MR. CHRIS H. GORIS			Date of Receipt M M / D D / Y Y Y Y 05 22 2015		
Mailing Address P.O. BOX 9196			Transaction ID : SA11.299717		
City GLENDALE	State CA	Zip Code 91226-0196	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
Name of Employer JEANE RIPPON		Occupation APARTMENT MANAGER	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 550.00	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		

B. Full Name (Last, First, Middle Initial) MR. DENNIS R R. HANSELL			Date of Receipt M M D D Y Y 04 29 2015		
Mailing Address 7515 RIVENDELL DR			Transaction ID : SA11.372188		
City SPRING	State TX	Zip Code 77379-7047	Amount of Each Receipt this Period , , 44.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 44.00 CONTRIBUTION		
Name of Employer SUDERMAN & YOUNG		Occupation EXECUTIVE	Amount of Each Receipt this Period , , 44.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 504.00	Amount of Each Receipt this Period , , 44.00 CONTRIBUTION		

C. Full Name (Last, First, Middle Initial) MS. SANDRA S. HILL			Date of Receipt M M D D Y Y 04 16 2015		
Mailing Address 18758 PARADISE LANE			Transaction ID : SA11.255913		
City FLINT	State TX	Zip Code 75762-9637	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 290.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		

SUBTOTAL of Receipts This Page (optional).....			, , 104.00		
TOTAL This Period (last page this line number only).....			, , .		

201507150200184987

**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)	PAGE 11 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) MS. SANDRA S. HILL			Date of Receipt M M D D Y Y 05 16 2015		
Mailing Address 18758 PARADISE LANE			Transaction ID : SA11.290895		
City FLINT	State TX	Zip Code 75762-9637	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 290.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		

Full Name (Last, First, Middle Initial) MS. SANDRA S. HILL			Date of Receipt M M D D Y Y 06 16 2015		
Mailing Address 18758 PARADISE LANE			Transaction ID : SA11.315254		
City FLINT	State TX	Zip Code 75762-9637	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 290.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		

Full Name (Last, First, Middle Initial) PAUL HUDGENS			Date of Receipt M M / D D Y Y 04 29 2015		
Mailing Address 8148 SWEET WATER ROAD			Transaction ID : SA11.372186		
City LONE TREE	State CO	Zip Code 80124-3011	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
Name of Employer SCHLUMBERGER		Occupation ENGINEERING TECH	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 675.00	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		

SUBTOTAL of Receipts This Page (optional).....	, , 45.00
TOTAL This Period (last page this line number only).....	, ,

201507150200184988

**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)	PAGE 12 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) MR. JONATHAN JACKSON		Date of Receipt M M D D / Y Y 04 16 2015	
Mailing Address 6011 W. COURTYARD DRIVE SUITE 450		Transaction ID : SA11.255915	
City AUSTIN State TX Zip Code 78730-5114	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Name of Employer SPEAKWRITE	Occupation SALES	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 330.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	

B. Full Name (Last, First, Middle Initial) MR. JONATHAN JACKSON		Date of Receipt M M D D / Y Y 06 16 2015	
Mailing Address 6011 W. COURTYARD DRIVE SUITE 450		Transaction ID : SA11.315255	
City AUSTIN State TX Zip Code 78730-5114	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Name of Employer SPEAKWRITE	Occupation SALES	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 330.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	

C. Full Name (Last, First, Middle Initial) JOSHUA JEFFCOATS		Date of Receipt M M D D / Y Y 04 16 2015	
Mailing Address 665 GOLD CREEK AVE		Transaction ID : SA11.255909	
City BATTLE MOUNTAIN State NV Zip Code 89820-2129	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Name of Employer MINER	Occupation MAINTENANCE	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 260.00	Amount of Each Receipt this Period , , 10.00 CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional).....	, , 30.00
TOTAL This Period (last page this line number only).....	, , .

201507150200184989

**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)	PAGE 13 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) JOSHUA JEFFCOATS		Date of Receipt M M / D D / Y Y 05 / 16 / 2015
Mailing Address 665 GOLD CREEK AVE		Transaction ID : SA11.290892
City BATTLE MOUNTAIN	State NV	Zip Code 89820-2129
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer MINER	Occupation MAINTENANCE	10.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		260.00

Full Name (Last, First, Middle Initial) MR. RONALD GRANT JOHNSEY		Date of Receipt M M / D D / Y Y 04 / 14 / 2015
Mailing Address 14901 QUORUM DRIVE SUITE 600		Transaction ID : SA11.382506
City DALLAS	State TX	Zip Code 75254-6710
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer AXIOMETRICS INC.	Occupation REAL ESTATE RESEARCH	250.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		5000.00

SEE CONTRIBUTION REFUND ON SCHEDULE 20A

Full Name (Last, First, Middle Initial) AGNES KOCH		Date of Receipt M M / D D / Y Y 04 / 08 / 2015
Mailing Address 63 SILVER BAYOU CT		Transaction ID : SA11.372181
City THE WOODLANDS	State TX	Zip Code 77384-5019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	25.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		625.00

SUBTOTAL of Receipts This Page (optional)	285.00
TOTAL This Period (last page this line number only)	

201507150200184990

**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)	PAGE 14 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) AGNES KOCH			Date of Receipt M M / D D Y Y 05 08 2015		
Mailing Address 63 SILVER BAYOU CT			Transaction ID : SA11.372193		
City	State	Zip Code	Amount of Each Receipt this Period		
THE WOODLANDS	TX	77384-5019	25.00		
FEC ID number of contributing federal political committee. C			CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 625.00	CONTRIBUTION		

B. Full Name (Last, First, Middle Initial) MS. SUZANNE WEEKLEY LEACH			Date of Receipt M M / D D Y Y 04 29 2015		
Mailing Address 10730 ODAIR CT.			Transaction ID : SA11.372187		
City	State	Zip Code	Amount of Each Receipt this Period		
DALLAS	TX	75218-1382	25.00		
FEC ID number of contributing federal political committee. C			CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1175.00	CONTRIBUTION		

C. Full Name (Last, First, Middle Initial) CAROLYNNE PRIORE			Date of Receipt M M / D D Y Y 04 22 2015		
Mailing Address 213 COMANCHE DR			Transaction ID : SA11.372185		
City	State	Zip Code	Amount of Each Receipt this Period		
LAKE KIOWA	TX	76240-9552	25.00		
FEC ID number of contributing federal political committee. C			CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 675.00	CONTRIBUTION		

SUBTOTAL of Receipts This Page (optional).....	, , 75.00
TOTAL This Period (last page this line number only).....	, ,

201507150200184991

**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)		PAGE 15 OF 130	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) MS. SAMANTHA S. SMITH		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 1429 PETTIT DRIVE		Transaction ID : SA11.294607
City TYLER	State TX	
Zip Code 75701-9144		Amount of Each Receipt this Period CONTRIBUTION 40.00
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION 310.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

B. Full Name (Last, First, Middle Initial) PEGGY M. SPIKING		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 9801 W PARMER LANE APT. 1617		Transaction ID : SA11.372190
City AUSTIN	State TX	
Zip Code 78717-4618		Amount of Each Receipt this Period CONTRIBUTION 15.00
FEC ID number of contributing federal political committee. C		
Name of Employer URS CORPORATION	Occupation PROJECT ACCOUNTING SPEC	CONTRIBUTION 420.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

C. Full Name (Last, First, Middle Initial) MR. DONALD L. STEVENS		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 5511 20TH ST.		Transaction ID : SA11.372184
City LUBBOCK	State TX	
Zip Code 79407-2005		Amount of Each Receipt this Period CONTRIBUTION 10.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION 355.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

201507150200184992

**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)	PAGE 16 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) MRS. MARILYN ANN THIGPEN		Date of Receipt M M / D D / Y Y 05 22 2015
Mailing Address 9337 LETO RD.		Transaction ID : SA11.299713
City HOUSTON	State TX	Zip Code 77080-7428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation RETIRED	100.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		350.00

B. Full Name (Last, First, Middle Initial) DR. RODNEY B. TRIMBLE		Date of Receipt M M / D D / Y Y 05 11 2015
Mailing Address 2342 QUENBY STREET		Transaction ID : SA11.283485
City HOUSTON	State TX	Zip Code 77005-1504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	25.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		450.00

C. Full Name (Last, First, Middle Initial) DR. RODNEY B. TRIMBLE		Date of Receipt M M / D D / Y Y 06 03 2015
Mailing Address 2342 QUENBY STREET		Transaction ID : SA11.305817
City HOUSTON	State TX	Zip Code 77005-1504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	25.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	CONTRIBUTION
		450.00

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

201507150200184993

**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)	PAGE 17 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) MR. PAUL W. TRUEMAN		Date of Receipt M M D D Y Y 05 11 2015	
Mailing Address 3700 PALOMAR LANE		Transaction ID : SA11.283482	
City State Zip Code AUSTIN TX 78727-3034	Amount of Each Receipt this Period , , 25.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 600.00 CONTRIBUTION	
Name of Employer SELF-EMPLOYED DBA TECH-ASSIST	Occupation ADVERTISING AND NETWORKING OF USEC	Amount of Each Receipt this Period , , 600.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 600.00	Amount of Each Receipt this Period , , 600.00 CONTRIBUTION	

Full Name (Last, First, Middle Initial) MS. DEBORAH J. WOODRUFF		Date of Receipt M M D D Y Y 04 07 2015	
Mailing Address 304 NORTH 10TH STREET		Transaction ID : SA11.372180	
City State Zip Code WOLFFORTH TX 79382-3233	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1350.00	Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	

Full Name (Last, First, Middle Initial) MS. DEBORAH J. WOODRUFF		Date of Receipt M M D D Y Y 05 07 2015	
Mailing Address 304 NORTH 10TH STREET		Transaction ID : SA11.372192	
City State Zip Code WOLFFORTH TX 79382-3233	Amount of Each Receipt this Period , , 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 1350.00	Amount of Each Receipt this Period , , 1350.00 CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional).....	, , 125.00
TOTAL This Period (last page this line number only).....	, , 1479.00

201507150200184994

**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)	PAGE 18 OF 130
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. Full Name (Last, First, Middle Initial) BORDER HEALTH FEDERAL PAC		Date of Receipt M M D D Y Y 06 23 2015	
Mailing Address 612 W. NOLANA SUITE 340		Transaction ID : SA11.322289	
City MCALEN State TX Zip Code 78504-3088	Amount of Each Receipt this Period , , 5000.00		
FEC ID number of contributing federal political committee. C C00415752		CONTRIBUTION	
Name of Employer Occupation	Amount of Each Receipt this Period , , 5000.00		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 5000.00		

B. Full Name (Last, First, Middle Initial)		Date of Receipt M M /	
Mailing Address		Amount of Each Receipt this Period , ,	
City State Zip Code	Amount of Each Receipt this Period , ,		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , ,	
Name of Employer Occupation	Amount of Each Receipt this Period , ,		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,		

C. Full Name (Last, First, Middle Initial)		Date of Receipt M	
Mailing Address		Amount of Each Receipt this Period , ,	
City State Zip Code	Amount of Each Receipt this Period , ,		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , ,	
Name of Employer Occupation	Amount of Each Receipt this Period , ,		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,		

SUBTOTAL of Receipts This Page (optional).....	, , 5000.00
TOTAL This Period (last page this line number only).....	, , 5000.00

201507150200184995

**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)		PAGE 19 OF 130	
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) PAYCHEX			Date of Receipt M M / D D Y Y 04 20 2015	
Mailing Address 5253 PRUE ROAD BLDG 1 STE 100			Transaction ID : SA.6001	
City SAN ANTONIO	State TX	Zip Code 78240	Amount of Each Receipt this Period 5.81	
FEC ID number of contributing federal political committee. C			VENDOR REFUND - PAYROLL TAXES	
Name of Employer		Occupation	, , .	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	12460.22	

Full Name (Last, First, Middle Initial) PAYCHEX			Date of Receipt M M / D D Y Y Y Y 05 08 2015	
Mailing Address 5253 PRUE ROAD BLDG 1 STE 100			Transaction ID : SA.6002	
City SAN ANTONIO	State TX	Zip Code 78240	Amount of Each Receipt this Period 84.00	
FEC ID number of contributing federal political committee. C			VENDOR REFUND - PAYROLL SERVICE FEE	
Name of Employer		Occupation	, , .	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	12460.22	

Full Name (Last, First, Middle Initial) WIRTH TELECOM SERVICES, INC.			Date of Receipt M M / D D Y Y 05 07 2015	
Mailing Address 815-A BRAZOS St #239			Transaction ID : SA.6003	
City AUSTIN	State TX	Zip Code 78701	Amount of Each Receipt this Period 56.57	
FEC ID number of contributing federal political committee. C			VENDOR REFUND - TELEPHONE SERVICE	
Name of Employer		Occupation	, , .	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2383.12	

SUBTOTAL of Receipts This Page (optional)	, , .	146.38
TOTAL This Period (last page this line number only)	, , .	146.38

201507150200184996

**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 20 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. RAFAEL CRUZ		Date of Disbursement M M / D D / Y Y 05 / 03 / 2015	
Mailing Address 1152 INDIAN RUN DR APT 1116		Amount of Each Disbursement this Period 188.41	
City CARROLLTON	State TX	Zip Code 75010	Transaction ID : SB.68
Purpose of Disbursement TRAVEL- MILEAGE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. BROOKE JONES BACAK		Date of Disbursement M M / D D / Y Y 04 / 06 / 2015	
Mailing Address 5006 YORKSHIRE LN		Amount of Each Disbursement this Period 3000.00	
City TUSCALOOSA	State AL	Zip Code 35406	Transaction ID : SB.13
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. JAMES CHRISTOFERSON		Date of Disbursement M M / D D / Y Y 04 / 06 / 2015	
Mailing Address 812 K STREET NE		Amount of Each Disbursement this Period 125.00	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB.37
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3313.41
TOTAL This Period (last page this line number only).....	.

201507150200184997

**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 121 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y Y 04 01 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 5.11	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.108
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y Y 04 30 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 13.12	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.109
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y Y 06 02 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 5.98	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.110
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	24.21
TOTAL This Period (last page this line number only).....	

201507150200184998

**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 122 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. WILSON PERKINS ALLEN OPINION RESEARCH		Date of Disbursement M M / D D Y Y Y 04 23 2015
Mailing Address 1319 CLASSEN DR		Amount of Each Disbursement this Period 10645.14 Transaction ID : SB.111
City OKLAHOMA CITY State OK Zip Code 73103	Category/ Type	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M /
Mailing Address		Amount of Each Disbursement this Period ,
City State Zip Code	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement /
Mailing Address		Amount of Each Disbursement this Period ,
City State Zip Code	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10645.14
TOTAL This Period (last page this line number only).....	130530.46

201507150200184999

**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 123 OF 130			
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. ALLEN HARTMAN		Date of Disbursement M M D D Y Y 04 23 2015	
Mailing Address 2909 HILLCROFT STE 420			
City HOUSTON	State TX	Zip Code 77057	Amount of Each Disbursement this Period 400.00 Transaction ID : SB.316
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. RONALD GRANT JOHNSEY		Date of Disbursement M M D D Y Y 04 23 2015	
Mailing Address 14901 QUORUM DRIVE			
City DALLAS	State TX	Zip Code 75254	Amount of Each Disbursement this Period 1000.00 Transaction ID : SB.317
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M / /	
Mailing Address			
City	State	Zip Code	Amount of Each Disbursement this Period ,
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	1400.00

201507150200185000

**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 124 OF 130
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MOTHER EMANUEL HOPE FUND		Date of Disbursement M M / D U Y Y 06 / 25 / 2015
Mailing Address PO BOX 304		Amount of Each Disbursement this Period 4600.00 Transaction ID : SB.44
City CHARLESTON State SC Zip Code 29402	Purpose of Disbursement DONATION	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D
Mailing Address		Amount of Each Disbursement this Period ,
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / / Y
Mailing Address		Amount of Each Disbursement this Period ,
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	,	,	4600.00
TOTAL This Period (last page this line number only).....	,	,	4600.00

201507150200185001

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) **Ted Cruz for Senate** Transaction ID : **SC.1**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
RAFAEL EDWARD TED CRUZ
 Primary
 General
 Other (specify) ▼

Mailing Address
1001 CONGRESS AVE SUITE 150

City State ZIP Code LOAN MADE FROM CANDIDATE'S PERSONAL FUNDS
 AUSTIN TX 78701

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70000.00	70000.00	0.00

TERMS Date Incurred Date Due Interest Rate Secured:
 03^M 31^D 2011 12^M 31^D 2012 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)... 0.00
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.

201507150200185002

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Ted Cruz for Senate** Transaction ID : **SC.4**

LOAN SOURCE Full Name (Last, First, Middle Initial)
RAFAEL EDWARD TED CRUZ

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
815 A BRAZOS PMB 550

City State ZIP Code
AUSTIN TX 78701

CANDIDATE LOAN FROM PERSONAL FUNDS

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	250000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M ⁰⁷ D ²³ 2012	M ¹² D ³¹ 2012	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).....	0.00
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.

201507150200185003

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) **Ted Cruz for Senate** Transaction ID : **SC.5**

LOAN SOURCE Full Name (Last, First, Middle Initial)
RAFAEL EDWARD TED CRUZ

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
815 A BRAZOS PMB 550

City State ZIP Code
AUSTIN TX 78701 **CANDIDATE LOAN FROM PERSONAL FUNDS**

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	150000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M ⁰⁸ D ⁰⁷ 2012	M ¹² D ³¹ 2012	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)..... ▶ , , 0.00

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.

201507150200185004

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)
Ted Cruz for Senate

Transaction ID : **SC.3**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]**
RAPHAEL EDWARD TED CRUZ

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
815 A BRAZOS PMB 550

City State ZIP Code
AUSTIN TX 78701

CANDIDATE LOAN FROM PERSONAL FUNDS

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400000.00	400000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M ⁰⁵ D ¹⁸ 2012	M ¹² D ³¹ 2013	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)..... ▶ , , 0.00

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.

201507150200185005

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) **Ted Cruz for Senate** Transaction ID : **SC.2**

LOAN SOURCE Full Name (Last, First, Middle Initial)
RAPHAEL EDWARD TED CRUZ

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
815 A BRAZOS PMB 550

City State ZIP Code
AUSTIN TX 78701

CANDIDATE LOAN FROM PERSONAL FUNDS

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
560000.00	15000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 P 22 2012	M 12 P 31 2012	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)..... ▶	0.00
TOTALS This Period (last page in this line only) .. ▶	0.00

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

201507150200185006

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : SC.2

REMAINING LOAN BALANCE OF \$545,000 (PAGE 187, SCHEDULE C) APPEARS AS A ZERO LOAN BALANCE BECAUSE ON 3/31/2015, THE LOAN WAS CONVERTED TO A CANDIDATE CONTRIBUTION. PLEASE SEE SCHEDULE A, LINE 11D. THE CONVERSION OF THE LOAN TO A CONTRIBUTION IS MADE BY VIRTUE OF THE STATUTORY PROVISIONS; HOWEVER, WE RESERVE THE RIGHT TO CHALLENGE THE CONSTITUTIONALITY OF THIS PROVISION OF LAW.

Form/Schedule:

Transaction ID:

201507150200185007

**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 21 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. JOHN DROGIN		Date of Disbursement M M / D D / Y Y Y 04 / 06 / 2015
Mailing Address 7418 MIFFLIN KENEDY TERRACE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB.38
City AUSTIN	State TX	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. KAYE GOOLSBY		Date of Disbursement M M / D D / Y Y Y 04 / 23 / 2015
Mailing Address 1602 KINGS CASTLE DR		Amount of Each Disbursement this Period 511.64 Transaction ID : SB.42
City KATY	State TX	
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y Y 04 / 23 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 449.74 Transaction ID : SB.42B [MEMO ITEM]
City BETHESDA	State MD	
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1511.64
TOTAL This Period (last page this line number only).....	

201507150200185008

**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 22 OF 130
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMANDA KINNAN		Date of Disbursement M M / D D Y Y 04 / 06 2015	
Mailing Address PO BOX 3095		Amount of Each Disbursement this Period 1000.00	
City SHEPERDSTOWN	State WV	Zip Code 25443	Transaction ID : SB.1
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. JONATHAN MCCLELLAN		Date of Disbursement M M / D D Y Y 04 / 06 2015	
Mailing Address 7204 BENDING OAK RD		Amount of Each Disbursement this Period 2130.00	
City AUSTIN	State TX	Zip Code 78749	Transaction ID : SB.39
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. NICK MUZIN		Date of Disbursement M M / D D Y Y 04 / 06 2015	
Mailing Address 800 STONINGTON RD		Amount of Each Disbursement this Period 3088.50	
City SILVER SPRING	State MD	Zip Code 20902	Transaction ID : SB.45
Purpose of Disbursement FINANCE CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	6218.50
TOTAL This Period (last page this line number only).....	

201507150200185009

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. JOSH PERRY		Date of Disbursement M M / D D / Y Y 04 / 06 / 2015
Mailing Address 3214 KEYWOOD LANE		Amount of Each Disbursement this Period 1420.00 Transaction ID : SB.40
City KATY	State TX	
Zip Code 77449	Purpose of Disbursement DIGITAL CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BRUCE REDDEN		Date of Disbursement M M / D D / Y Y 04 / 06 / 2015
Mailing Address 2323 N FIELD ST APT 1236		Amount of Each Disbursement this Period 2130.00 Transaction ID : SB.14
City DALLAS	State TX	
Zip Code 75201	Purpose of Disbursement CONTRACT LABOR- TRAVEL OPERATIONS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DAVID SAWYER		Date of Disbursement M M / D D / Y Y 04 / 06 / 2015
Mailing Address 7410 DEARBORN		Amount of Each Disbursement this Period 1775.00 Transaction ID : SB.24
City HOUSTON	State TX	
Zip Code 77055	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5325.00
TOTAL This Period (last page this line number only).....	

201507150200185010

**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 24 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. DAVID SAWYER		Date of Disbursement M M / D D Y Y 04 / 23 2015	
Mailing Address 7410 DEARBORN		Amount of Each Disbursement this Period 131.53 Transaction ID : SB.25	
City HOUSTON State TX Zip Code 77055	Purpose of Disbursement TRAVEL		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAUL TELLER		Date of Disbursement M M / D D Y Y 04 / 06 2015	
Mailing Address 2611 WASHINGTON AVE		Amount of Each Disbursement this Period 125.00 Transaction ID : SB.46	
City CHEVY CHASE State MD Zip Code 20815	Purpose of Disbursement POLITICAL STRATEGY CONSULTING		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ASTADIA		Date of Disbursement M M / D D Y Y 04 / 06 2015	
Mailing Address 12724 GRAN BAY PARKWAY W STE 300		Amount of Each Disbursement this Period 2174.20 Transaction ID : SB.5	
City JACKSONVILLE State FL Zip Code 32258	Purpose of Disbursement RENT		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2430.73
TOTAL This Period (last page this line number only).....	

201507150200185011

**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 25 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. ASTADIA		Date of Disbursement M M D D Y Y 04 06 2015	
Mailing Address 12724 GRAN BAY PARKWAY W STE 300		Amount of Each Disbursement this Period 4121.64 Transaction ID : SB.6	
City JACKSONVILLE State FL Zip Code 32258	Purpose of Disbursement UTILITIES/TELEPHONE SERVICE		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M D D Y Y 04 20 2015	
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 161.80 Transaction ID : SB.7	
City DALLAS State TX Zip Code 75202	Purpose of Disbursement TELEPHONE SERVICE		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M D D / Y Y 05 18 2015	
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 162.21 Transaction ID : SB.8	
City DALLAS State TX Zip Code 75202	Purpose of Disbursement TELEPHONE SERVICE		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4445.65
TOTAL This Period (last page this line number only).....	

201507150200185012

**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 26 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M D D Y Y 06 18 2015	
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 162.21	
City DALLAS	State TX	Zip Code 75202	Transaction ID : SB.9
Purpose of Disbursement TELEPHONE SERVICE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M D D Y Y 04 21 2015	
Mailing Address 1717 KING ST		Amount of Each Disbursement this Period 375.37	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB.10
Purpose of Disbursement BANK FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M D D Y Y 05 21 2015	
Mailing Address 1717 KING ST		Amount of Each Disbursement this Period 131.63	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB.11
Purpose of Disbursement BANK FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	669.21
TOTAL This Period (last page this line number only).....	

201507150200185013

**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 27 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M D D Y Y 06 22 2015	
Mailing Address 1717 KING ST		Amount of Each Disbursement this Period 154.09	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB.12
Purpose of Disbursement BANK FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. BB&T BANK CARD		Date of Disbursement M M / D D / Y Y 05 01 2015	
Mailing Address PO BOX 996		Amount of Each Disbursement this Period 51160.31	
City WILSON	State NC	Zip Code 27894	Transaction ID : SB.112
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. ABM PARKING		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 1801 CRYSTAL DR		Amount of Each Disbursement this Period 414.00	
City ARLINGTON	State VA	Zip Code 22202	Transaction ID : SB.218 [MEMO ITEM]
Purpose of Disbursement PARKING SERVICE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	51314.40
TOTAL This Period (last page this line number only).....	

201507150200185014

**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 28 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 18.95	
City FORT WORTH	State TX	Zip Code 76155	Transaction ID : SB.126 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 256.10	
City FORT WORTH	State TX	Zip Code 76155	Transaction ID : SB.127 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 1097.20	
City FORT WORTH	State TX	Zip Code 76155	Transaction ID : SB.128 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185015

**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 29 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 1252.20 Transaction ID : SB.129 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 467.70 Transaction ID : SB.141 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M D D / Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 788.20 Transaction ID : SB.142 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185016

**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 30 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 635.10 Transaction ID : SB.156 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 373.00 Transaction ID : SB.227 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 557.00 Transaction ID : SB.235 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	-

201507150200185017

**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 31 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M D D / Y Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 436.60 Transaction ID : SB.244 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M D D / Y Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 436.60 Transaction ID : SB.245 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M D D / Y Y Y 05 01 2015
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 320.60 Transaction ID : SB.246 [MEMO ITEM]
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement TRAVEL	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185018

**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 32 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 316.60 Transaction ID : SB.268 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 569.10 Transaction ID : SB.277 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 458.60 Transaction ID : SB.278 [MEMO ITEM]	
City FORT WORTH	State TX		Zip Code 76155
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185019

**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 33 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMTRAK		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 50 MASSACHUSETTS AVE NE		Amount of Each Disbursement this Period 267.00 Transaction ID : SB.138 [MEMO ITEM]
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMTRAK		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 50 MASSACHUSETTS AVE NE		Amount of Each Disbursement this Period 351.00 Transaction ID : SB.139 [MEMO ITEM]
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 437.00 Transaction ID : SB.253 [MEMO ITEM]
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement PHONE SERVICE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185020

**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 34 OF 130
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. BANNERWORLD		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 2700 S. BROADWAY		Amount of Each Disbursement this Period 1641.56	
City LOS ANGELES	State CA	Zip Code 90007	Transaction ID : SB.177
Purpose of Disbursement PRINTING		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 1717 KING ST		Amount of Each Disbursement this Period 0.51	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB.299
Purpose of Disbursement BANK FEE		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. CHEVRON		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 28.36	
City SAN RAMON	State CA	Zip Code 94583	Transaction ID : SB.271
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185021

**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 35 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. CHILI'S GRILL & BAR		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 6820 LBJ FREEWAY		Amount of Each Disbursement this Period 18.38 Transaction ID : SB.252 [MEMO ITEM]
City DALLAS	State TX	
Zip Code 75240	Purpose of Disbursement FOOD/BEVERAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHILI'S GRILL & BAR		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 6820 LBJ FREEWAY		Amount of Each Disbursement this Period 25.05 Transaction ID : SB.269 [MEMO ITEM]
City DALLAS	State TX	
Zip Code 75240	Purpose of Disbursement FOOD/BEVERAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHIPOTLE		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 4300 WILSON BLVD		Amount of Each Disbursement this Period 16.70 Transaction ID : SB.234 [MEMO ITEM]
City ARLINGTON	State VA	
Zip Code 22203	Purpose of Disbursement FOOD/BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185022

**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 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. CHIPOTLE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 4300 WILSON BLVD		Amount of Each Disbursement this Period 12.34 Transaction ID : SB.239 [MEMO ITEM]
City ARLINGTON	State VA Zip Code 22203	
Purpose of Disbursement FOOD/BEVERAGES	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CRUCIAL.COM		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 3475 E. COMMERCIAL CT.		Amount of Each Disbursement this Period 44.36 Transaction ID : SB.190 [MEMO ITEM]
City MERIDIAN	State ID Zip Code 83642	
Purpose of Disbursement WEB SERVICE	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DIRKSEN NORTH CAFE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 100 CONSTITUTION AVE, NE		Amount of Each Disbursement this Period 19.20 Transaction ID : SB.151 [MEMO ITEM]
City WASHINGTON	State DC Zip Code 20002	
Purpose of Disbursement FOOD/BEVERAGES	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185023

**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 37 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. DIRKSEN NORTH CAFE		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 100 CONSTITUTION AVE, NE		Amount of Each Disbursement this Period 47.65	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB.152
Purpose of Disbursement FOOD/BEVERAGES	Candidate Name		Category/ Type [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. DOLLAR TREE		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 500 VOLVO PKWY		Amount of Each Disbursement this Period 33.56	
City CHESAPEAKE	State VA	Zip Code 23320	Transaction ID : SB.265
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name		Category/ Type [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. DOUBLETREE HOTELS		Date of Disbursement MM / DD YY 05 / 01 2015	
Mailing Address 7930 JONES BRANCH DR		Amount of Each Disbursement this Period 189.28	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.291
Purpose of Disbursement TRAVEL	Candidate Name		Category/ Type [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185024

**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 38 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (in Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. DOUBLETREE HOTELS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 7930 JONES BRANCH DR		Amount of Each Disbursement this Period 189.28 Transaction ID : SB.292
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. DOUBLETREE HOTELS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 7930 JONES BRANCH DR		Amount of Each Disbursement this Period 200.48 Transaction ID : SB.293
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. DROPBOX.COM INC		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 185 BERRY ST STE 400		Amount of Each Disbursement this Period 75.00 Transaction ID : SB.191
City SAN FRANCISCO	State CA	
Zip Code 94107	Purpose of Disbursement SOFTWARE PURCHASE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185025

**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 39 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. ENTERPRISE RENT-A-CAR		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 600 CORPORATE PARK DR		Amount of Each Disbursement this Period 376.18	
City ST. LOUIS	State MO	Zip Code 63105	Transaction ID : SB.241 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. EXXON MOBIL		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 5959 LAS COLINAS BLVD		Amount of Each Disbursement this Period 29.30	
City IRVING	State TX	Zip Code 75039	Transaction ID : SB.184 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. FACEBOOK		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 1601 SOUTH CALIFORNIA AVE		Amount of Each Disbursement this Period 750.09	
City PALO ALTO	State CA	Zip Code 94304	Transaction ID : SB.158 [MEMO ITEM]
Purpose of Disbursement WEB SERVICES		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185026

**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)

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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement M M / D D Y Y 05 01 2015
Mailing Address 1601 SOUTH CALIFORNIA AVE		Amount of Each Disbursement this Period 46.31
City PALO ALTO	State CA Zip Code 94304	
Purpose of Disbursement WEB SERVICES	Candidate Name	Transaction ID : SB.266 [MEMO ITEM]
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M / D D Y Y 05 01 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement WEB SERVICE	Candidate Name	Transaction ID : SB.157 [MEMO ITEM]
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D Y Y 05 01 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement WEB SERVICE	Candidate Name	Transaction ID : SB.160 [MEMO ITEM]
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
SUBTOTAL of Disbursements This Page (optional).....		0.00
TOTAL This Period (last page this line number only).....		

201507150200185027

**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)

<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.161 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.162 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.163 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185028

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00 Transaction ID : SB.180 [MEMO ITEM]
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement WEB SERVICE	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00 Transaction ID : SB.181 [MEMO ITEM]
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement WEB SERVICE	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00 Transaction ID : SB.182 [MEMO ITEM]
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement WEB SERVICE	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185029

**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 43 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.186 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 1000.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.187 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M D D / Y Y 05 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.204 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185030

**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 44 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.205 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.221 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 500.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.222 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185031

**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 45 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY			
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement WEB SERVICE	Candidate Name		Transaction ID : SB.223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY			
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement WEB SERVICE	Candidate Name		Transaction ID : SB.224
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY			
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement WEB SERVICE	Candidate Name		Transaction ID : SB.236
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185032

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 235.15	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Transaction ID : SB.287 [MEMO ITEM]
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. HEB GAS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 2512 E RIVERSIDE DR.		Amount of Each Disbursement this Period 127.71	
City AUSTIN	State TX	Zip Code 78741	Transaction ID : SB.257 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. HEB GAS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 2512 E RIVERSIDE DR.		Amount of Each Disbursement this Period 18.34	
City AUSTIN	State TX	Zip Code 78741	Transaction ID : SB.270 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185033

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M D D Y Y Y 05 01 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.165
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y Y 05 01 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.166
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement M M D D / Y Y Y 05 01 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.167
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185034

**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 48 OF 130
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.168
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.169
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.170
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185035

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period , , 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.171 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	
Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period , , 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.172 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	
Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement M M D D Y Y 05 01 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period , , 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.173 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	
SUBTOTAL of Disbursements This Page (optional).....		, , 0.00	
TOTAL This Period (last page this line number only).....		, ,	

201507150200185036

**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 50 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.174 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.175 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96	
City MCLEAN	State VA	Zip Code 22102	Transaction ID : SB.179 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185037

**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 51 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.210 [MEMO ITEM]
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.211 [MEMO ITEM]
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 133.96 Transaction ID : SB.212 [MEMO ITEM]
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

201507150200185038

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 811.57 Transaction ID : SB.237 [MEMO ITEM]
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 7930 JONES BRANCH DR.		Amount of Each Disbursement this Period 30.06 Transaction ID : SB.303 [MEMO ITEM]
City MCLEAN	State VA	
Zip Code 22102	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
Full Name (Last, First, Middle Initial) C. HOTEL JULIEN DUBUQUE		Date of Disbursement M M / D D / Y Y 05 01 2015
Mailing Address 200 MAIN ST.		Amount of Each Disbursement this Period 156.80 Transaction ID : SB.281 [MEMO ITEM]
City DUBUQUE	State IA	
Zip Code 52001	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
SUBTOTAL of Disbursements This Page (optional).....		0.00
TOTAL This Period (last page this line number only).....		

201507150200185039

**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)

<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HOTEL JULIEN DUBUQUE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 200 MAIN ST.		Amount of Each Disbursement this Period 156.80
City DUBUQUE	State IA	
Zip Code 52001	Purpose of Disbursement TRAVEL	Transaction ID : SB.282
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HOTEL JULIEN DUBUQUE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 200 MAIN ST.		Amount of Each Disbursement this Period 145.60
City DUBUQUE	State IA	
Zip Code 52001	Purpose of Disbursement TRAVEL	Transaction ID : SB.283
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HOTEL JULIEN DUBUQUE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 200 MAIN ST.		Amount of Each Disbursement this Period 156.80
City DUBUQUE	State IA	
Zip Code 52001	Purpose of Disbursement TRAVEL	Transaction ID : SB.284
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185040

**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
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. HOTEL JULIEN DUBUQUE

Full Name (Last, First, Middle Initial)
Mailing Address 200 MAIN ST.

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D Y Y Y
05 01 2015

Amount of Each Disbursement this Period
4.28

Transaction ID : SB.288

[MEMO ITEM]

B. HOTEL JULIEN DUBUQUE

Full Name (Last, First, Middle Initial)
Mailing Address 200 MAIN ST.

City DUBUQUE State IA Zip Code 52001

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D Y Y Y
05 01 2015

Amount of Each Disbursement this Period
4.28

Transaction ID : SB.289

[MEMO ITEM]

C. HYATT HOTELS

Full Name (Last, First, Middle Initial)
Mailing Address 71 S WACKER DR

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D Y Y Y
05 01 2015

Amount of Each Disbursement this Period
234.06

Transaction ID : SB.176

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

201507150200185041

**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 55 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. LA QUINTA INN		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 909 HIDDEN RIDGE STE 600		Amount of Each Disbursement this Period 99.45
City IRVING	State TX	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB.251
Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. LA QUINTA INN		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 909 HIDDEN RIDGE STE 600		Amount of Each Disbursement this Period 359.19
City IRVING	State TX	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB.286
Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. LIMOLINK		Date of Disbursement M M / D D Y Y Y 05 / 01 2015
Mailing Address 701 TAMA ST., BLDG. A		Amount of Each Disbursement this Period 292.40
City MARION	State IA	
Purpose of Disbursement TRAVEL	Candidate Name	Transaction ID : SB.159
Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185042

**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 56 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. LIMOLINK		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015	
Mailing Address 701 TAMA ST., BLDG. A		Amount of Each Disbursement this Period 493.40	
City MARION	State IA	Zip Code 52302	Transaction ID : SB.178 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. LIMOLINK		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015	
Mailing Address 701 TAMA ST., BLDG. A		Amount of Each Disbursement this Period 591.84	
City MARION	State IA	Zip Code 52302	Transaction ID : SB.203 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. LOVE'S TRAVEL SHOPS & COUNTRY STORES		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015	
Mailing Address 10601 N PENNSYLVANIA AVE		Amount of Each Disbursement this Period 29.57	
City OKLAHOMA CITY	State OK	Zip Code 73120	Transaction ID : SB.256 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185043

**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 57 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 693.20
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.133
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 693.20
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.134
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 693.20
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.135
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185044

**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 58 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 807.96 Transaction ID : SB.136 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 693.20 Transaction ID : SB.148 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 693.20 Transaction ID : SB.149 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185045

**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 59 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 807.96 Transaction ID : SB.150 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 402.38 Transaction ID : SB.188 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 6.95 Transaction ID : SB.200 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185046

**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 60 OF 130

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 6.95
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.201 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MARRIOTT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 47.87
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.202 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 304.27
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Transaction ID : SB.217 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185047

**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 61 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. MARRIOTT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 21.23 Transaction ID : SB.306 [MEMO ITEM]
City BETHESDA	State MD	
Zip Code 20817	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 2620 W. ANDERSON LANE		Amount of Each Disbursement this Period 238.14 Transaction ID : SB.213 [MEMO ITEM]
City AUSTIN	State TX	
Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 2620 W. ANDERSON LANE		Amount of Each Disbursement this Period 51.40 Transaction ID : SB.226 [MEMO ITEM]
City AUSTIN	State TX	
Zip Code 78757	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185048

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 2620 W. ANDERSON LANE		Amount of Each Disbursement this Period 292.17	
City AUSTIN	State TX	Zip Code 78757	Transaction ID : SB.264 [MEMO ITEM]
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 2620 W. ANDERSON LANE		Amount of Each Disbursement this Period 33.01	
City AUSTIN	State TX	Zip Code 78757	Transaction ID : SB.275 [MEMO ITEM]
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. PARTY CITY		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 25 GREEN POND RD. #1		Amount of Each Disbursement this Period 102.73	
City ROCKAWAY	State NJ	Zip Code 07866	Transaction ID : SB.276 [MEMO ITEM]
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

201507150200185049

**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 63 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PEI WEI		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 7676 E PINNACLE PEAK RD		Amount of Each Disbursement this Period 24.85	
City SCOTTSDALE	State AZ	Zip Code 85255	Transaction ID : SB.279 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. PLATINUM PARKING		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 719 OLIVE ST.		Amount of Each Disbursement this Period 8.00	
City DALLAS	State TX	Zip Code 75201	Transaction ID : SB.240 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. PLATINUM PARKING		Date of Disbursement M M D D Y Y Y 05 01 2015	
Mailing Address 719 OLIVE ST.		Amount of Each Disbursement this Period 8.00	
City DALLAS	State TX	Zip Code 75201	Transaction ID : SB.255 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185050

**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 64 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PLATINUM PARKING			Date of Disbursement M M / D D Y Y Y 05 01 2015	
Mailing Address 719 OLIVE ST.			Amount of Each Disbursement this Period 4.00 Transaction ID : SB.258 [MEMO ITEM]	
City DALLAS	State TX	Zip Code 75201		
Purpose of Disbursement TRAVEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PLATINUM PARKING			Date of Disbursement M M / D D Y Y Y 05 01 2015	
Mailing Address 719 OLIVE ST.			Amount of Each Disbursement this Period 8.00 Transaction ID : SB.272 [MEMO ITEM]	
City DALLAS	State TX	Zip Code 75201		
Purpose of Disbursement TRAVEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PLATINUM PARKING			Date of Disbursement M M / D D Y Y Y 05 01 2015	
Mailing Address 719 OLIVE ST.			Amount of Each Disbursement this Period 6.00 Transaction ID : SB.273 [MEMO ITEM]	
City DALLAS	State TX	Zip Code 75201		
Purpose of Disbursement TRAVEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185051

**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 65 OF 130
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PROVANTAGE, LLC		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7576 FREEDOM AVE, NW		Amount of Each Disbursement this Period 186.46	
City NORTH CANTON	State OH	Zip Code 44720	Transaction ID : SB.125
Purpose of Disbursement EQUIPMENT PURCHASE		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. PROVANTAGE, LLC		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 7576 FREEDOM AVE, NW		Amount of Each Disbursement this Period 187.98	
City NORTH CANTON	State OH	Zip Code 44720	Transaction ID : SB.140
Purpose of Disbursement EQUIPMENT PURCHASE		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. RADISSON HOTELS & RESORTS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 292.12	
City OMAHA	State NE	Zip Code 68164	Transaction ID : SB.247
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185052

**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 66 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 270.32 Transaction ID : SB.248 [MEMO ITEM]
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 157.77 Transaction ID : SB.294 [MEMO ITEM]
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 157.77 Transaction ID : SB.295 [MEMO ITEM]
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185053

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015	
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 157.71	
City OMAHA	State NE	Zip Code 68164	Transaction ID : SB.296
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015	
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 157.71	
City OMAHA	State NE	Zip Code 68164	Transaction ID : SB.297
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. RADISSON HOTELS & RESORTS		Date of Disbursement M M D D / Y Y Y 05 01 / 2015	
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 157.71	
City OMAHA	State NE	Zip Code 68164	Transaction ID : SB.298
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185054

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. RADISSON HOTELS & RESORTS		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 0.06
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Transaction ID : SB.300
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RADISSON HOTELS & RESORTS		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 0.06
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Transaction ID : SB.301
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RADISSON HOTELS & RESORTS		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 11340 BLONDO ST.		Amount of Each Disbursement this Period 0.06
City OMAHA	State NE	
Zip Code 68164	Purpose of Disbursement TRAVEL	Transaction ID : SB.302
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185055

**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 69 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. RELAX THE BACK		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 3248 STEVENS CREEK BLVD.		Amount of Each Disbursement this Period 189.44
City SAN JOSE	State CA	
Zip Code 95117	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB.123
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL OIL		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 33.35
City HOUSTON	State TX	
Zip Code 77252	Purpose of Disbursement TRAVEL	Transaction ID : SB.249
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SKYLINE DELI		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 2000 WEST LOOP S		Amount of Each Disbursement this Period 42.76
City HOUSTON	State TX	
Zip Code 77027	Purpose of Disbursement FOOD/BEVERAGE	Transaction ID : SB.254
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185056

**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 71 OF 130

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 235.00
City DALLAS State TX Zip Code 75235	Transaction ID : SB.147	
Purpose of Disbursement TRAVEL	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 591.00
City DALLAS State TX Zip Code 75235	Transaction ID : SB.183	
Purpose of Disbursement TRAVEL	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 1110.05
City DALLAS State TX Zip Code 75235	Transaction ID : SB.206	
Purpose of Disbursement TRAVEL	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185058

**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 72 OF 130
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 12.50 Transaction ID : SB.207 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name	
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M D D Y Y Y Y 05 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 298.00 Transaction ID : SB.208 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name	
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 220.10 Transaction ID : SB.209 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name	
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185059

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 511.00 Transaction ID : SB.225 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 350.00 Transaction ID : SB.242 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 301.00 Transaction ID : SB.243 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185060

**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 74 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 347.00 Transaction ID : SB.260 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 175.00 Transaction ID : SB.261 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 207.00 Transaction ID : SB.274 [MEMO ITEM]
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185061

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

A. THE CAMPBELL APARTMENT

Full Name (Last, First, Middle Initial)

Mailing Address GRAND CENTRAL TERMINAL15 VANDERBI

City NEW YORK State NY Zip Code 10017

Purpose of Disbursement VENDOR REFUND - FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement M M / D D Y Y Y Y
05 01 2015

Amount of Each Disbursement this Period
-3142.57

Transaction ID : SB.118

[MEMO ITEM]

B. THE NEIGHBORS PLACE

Full Name (Last, First, Middle Initial)

Mailing Address 104 PAULETTE CIR.

City LYNCHBURG State VA Zip Code 24502

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement M M / D D Y Y Y Y
05 01 2015

Amount of Each Disbursement this Period
670.00

Transaction ID : SB.164

[MEMO ITEM]

C. THE UPS STORE

Full Name (Last, First, Middle Initial)

Mailing Address 815-A BRAZOS STREET

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement M M / D D Y Y Y Y
05 01 2015

Amount of Each Disbursement this Period
39.68

Transaction ID : SB.143

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185062

**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 76 OF 130
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 62.30 Transaction ID : SB.185 [MEMO ITEM]
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 36.68 Transaction ID : SB.216 [MEMO ITEM]
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 62.30 Transaction ID : SB.238 [MEMO ITEM]
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185063

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 05 / 01 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 62.30
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Transaction ID : SB.280 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 05 / 01 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 81.14
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Transaction ID : SB.285 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 05 / 01 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 39.68
City AUSTIN	State TX	
Purpose of Disbursement POSTAGE		Transaction ID : SB.290 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

20150715020018506A

**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 78 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE VENETIAN		Date of Disbursement MM DD YY 05 01 2015	
Mailing Address 3355 S LAS VEGAS BLVD.		Amount of Each Disbursement this Period 245.28	
City VEGAS	State NV	Zip Code 89109	Transaction ID : SB.262
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. THE VENETIAN		Date of Disbursement MM DD YY 05 01 2015	
Mailing Address 3355 S LAS VEGAS BLVD.		Amount of Each Disbursement this Period 245.28	
City VEGAS	State NV	Zip Code 89109	Transaction ID : SB.263
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. TWITTERCOUNTER.COM		Date of Disbursement MM / DD YY 05 01 2015	
Mailing Address NIEUWE ACHTERGRACHT 17 1018		Amount of Each Disbursement this Period 17.00	
City AMSTERDAM	State ZZ	Zip Code 99999	Transaction ID : SB.189
Purpose of Disbursement SUBSCRIPTION		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185065

**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 79 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UBER TAXI		Date of Disbursement MM / DD / YY 05 / 01 / 2015	
Mailing Address 182 HOWARD ST, STE 8		Amount of Each Disbursement this Period 175.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.304
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES		Date of Disbursement MM / DD / YY 05 / 01 / 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 18.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.130
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement MM / DD / YY 05 / 01 / 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 17.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.131
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185066

**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 80 OF 130
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 8.01 Transaction ID : SB.144 [MEMO ITEM]
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 25.00 Transaction ID : SB.192 [MEMO ITEM]
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 546.50 Transaction ID : SB.146 [MEMO ITEM]
City HOUSTON	State TX	
Zip Code 77210	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185067

**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 81 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 200.00 Transaction ID : SB.214 [MEMO ITEM]
City HOUSTON State TX Zip Code 77210	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 136.00 Transaction ID : SB.215 [MEMO ITEM]
City HOUSTON State TX Zip Code 77210	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M D D Y Y 05 01 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 200.00 Transaction ID : SB.228 [MEMO ITEM]
City HOUSTON State TX Zip Code 77210	Purpose of Disbursement TRAVEL	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185068

**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 82 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 163.60 Transaction ID : SB.229 [MEMO ITEM]
City HOUSTON	State TX	
Zip Code 77210	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 313.10 Transaction ID : SB.230 [MEMO ITEM]
City HOUSTON	State TX	
Zip Code 77210	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 01 / 2015
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 313.10 Transaction ID : SB.231 [MEMO ITEM]
City HOUSTON	State TX	
Zip Code 77210	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185069

**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 83 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 313.10	
City HOUSTON	State TX	Zip Code 77210	Transaction ID : SB.232 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 840.00	
City HOUSTON	State TX	Zip Code 77210	Transaction ID : SB.233 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 307.10	
City HOUSTON	State TX	Zip Code 77210	Transaction ID : SB.250 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	-

201507150200185070

**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 84 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D Y Y 05 / 01 2015		
Mailing Address P.O. BOX 4607		Amount of Each Disbursement this Period 534.60 Transaction ID : SB.267 [MEMO ITEM]		
City HOUSTON	State TX			Zip Code 77210
Purpose of Disbursement TRAVEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:	Category/ Type			

Full Name (Last, First, Middle Initial) B. UNITED STATESFLAG.ORG		Date of Disbursement M M / D D Y Y 05 / 01 2015		
Mailing Address 1000 WASHINGTON DR, STE 1		Amount of Each Disbursement this Period 212.29 Transaction ID : SB.305 [MEMO ITEM]		
City NEW STANTON	State PA			Zip Code 15672
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:	Category/ Type			

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015		
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period -185.00 Transaction ID : SB.116 [MEMO ITEM]		
City PHOENIX	State AZ			Zip Code 85034
Purpose of Disbursement VENDOR REFUND-TRAVEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:	Category/ Type			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185071

**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 85 OF 130			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21		

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period -726.00	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.117 [MEMO ITEM]
Purpose of Disbursement VENDOR REFUND-TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 344.10	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.124 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 477.10	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.137 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185072

**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 86 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 22.00	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.155 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 478.00	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.193 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB.194 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185073

**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 87 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00 Transaction ID : SB.195
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00 Transaction ID : SB.196
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y 05 / 01 / 2015
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00 Transaction ID : SB.197
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185074

**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 88 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00 Transaction ID : SB.198 [MEMO ITEM]	
City PHOENIX	State AZ		Zip Code 85034
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement M M / D D Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 726.00 Transaction ID : SB.199 [MEMO ITEM]	
City PHOENIX	State AZ		Zip Code 85034
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement M M / D D / Y Y 05 / 01 2015	
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 821.00 Transaction ID : SB.219 [MEMO ITEM]	
City PHOENIX	State AZ		Zip Code 85034
Purpose of Disbursement TRAVEL	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185075

**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 89 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD YY 05 / 01 2015		
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 478.00 Transaction ID : SB.220 [MEMO ITEM]		
City PHOENIX	State AZ			Zip Code 85034
Purpose of Disbursement TRAVEL				Category/ Type
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD YY 05 / 01 2015		
Mailing Address 4000 E SKY HARBOR BLVD		Amount of Each Disbursement this Period 455.10 Transaction ID : SB.259 [MEMO ITEM]		
City PHOENIX	State AZ			Zip Code 85034
Purpose of Disbursement TRAVEL				Category/ Type
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD YY 05 / 01 2015		
Mailing Address 510 GUADALUPE ST		Amount of Each Disbursement this Period 42.00 Transaction ID : SB.153 [MEMO ITEM]		
City AUSTIN	State TX			Zip Code 78701
Purpose of Disbursement POSTAGE				Category/ Type
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185076

**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 90 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y 05 / 01 / 2015	
Mailing Address 510 GUADALUPE ST		Amount of Each Disbursement this Period 42.00 Transaction ID : SB.154 [MEMO ITEM]	
City AUSTIN	State TX		
Purpose of Disbursement POSTAGE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. BB&T BANK CARD		Date of Disbursement M M / D D / Y Y 06 / 01 / 2015	
Mailing Address PO BOX 996		Amount of Each Disbursement this Period 359.54 Transaction ID : SB.113	
City WILSON	State NC		
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y 06 / 01 / 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period -569.10 Transaction ID : SB.119 [MEMO ITEM]	
City FORT WORTH	State TX		
Purpose of Disbursement VENDOR REFUND-TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	359.54
TOTAL This Period (last page this line number only).....	

201507150200185077

**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 91 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M D D Y Y 06 01 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 508.00	
City FORT WORTH	State TX	Zip Code 76155	Transaction ID : SB.313 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M D D Y Y 06 01 2015	
Mailing Address 4333 AMON CARTER BLVD		Amount of Each Disbursement this Period 370.00	
City FORT WORTH	State TX	Zip Code 76155	Transaction ID : SB.314 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement M M D D Y Y 06 01 2015	
Mailing Address PO BOX 20706		Amount of Each Disbursement this Period -559.60	
City ATLANTA	State GA	Zip Code 30320	Transaction ID : SB.122 [MEMO ITEM]
Purpose of Disbursement VENDOR REFUND-TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185078

**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 92 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HAMPTON INN		Date of Disbursement MM DD YY 06 01 2015	
Mailing Address 15831 JOHN F KENNEDY BLVD			
City HOUSTON	State TX	Zip Code 77032	Amount of Each Disbursement this Period 164.16
Purpose of Disbursement TRAVEL	Candidate Name		Transaction ID : SB.307
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement MM / DD YY 06 01 2015	
Mailing Address 15831 JOHN F KENNEDY BLVD			
City HOUSTON	State TX	Zip Code 77032	Amount of Each Disbursement this Period 158.46
Purpose of Disbursement TRAVEL	Candidate Name		Transaction ID : SB.308
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) C. HAMPTON INN		Date of Disbursement MM DD YY 06 01 2015	
Mailing Address 15831 JOHN F KENNEDY BLVD			
City HOUSTON	State TX	Zip Code 77032	Amount of Each Disbursement this Period 158.46
Purpose of Disbursement TRAVEL	Candidate Name		Transaction ID : SB.309
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201507150200185079

**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 93 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. HAMPTON INN		Date of Disbursement M M / D D / Y Y 06 / 01 / 2015	
Mailing Address 15831 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 158.46	
City HOUSTON	State TX	Zip Code 77032	Transaction ID : SB.310 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. HAMPTON INN		Date of Disbursement M M / D D / Y Y 06 / 01 / 2015	
Mailing Address 15831 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 158.46	
City HOUSTON	State TX	Zip Code 77032	Transaction ID : SB.311 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. MARRIOTT		Date of Disbursement M M / D D / Y Y 06 / 01 / 2015	
Mailing Address 10400 FERNWOOD RD		Amount of Each Disbursement this Period 295.54	
City BETHESDA	State MD	Zip Code 20817	Transaction ID : SB.312 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185080

**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 94 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES		Date of Disbursement M M D D Y Y 06 01 2015	
Mailing Address 2702 LOVE FIELD DR			
City DALLAS	State TX	Zip Code 75235	Amount of Each Disbursement this Period -207.00
Purpose of Disbursement VENDOR REFUND-TRAVEL		Category/ Type	Transaction ID : SB.120
Candidate Name			[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. THE VENETIAN		Date of Disbursement M M D D / Y Y Y 06 01 2015	
Mailing Address 3355 S LAS VEGAS BLVD.			
City VEGAS	State NV	Zip Code 89109	Amount of Each Disbursement this Period -290.08
Purpose of Disbursement VENDOR REFUND-TRAVEL		Category/ Type	Transaction ID : SB.121
Candidate Name			[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement M M D D / Y Y 06 01 2015	
Mailing Address 182 HOWARD ST STE 8			
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 13.78
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB.315
Candidate Name			[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

201507150200185081

**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 95 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. BB&T BANK CARD		Date of Disbursement M M D D Y Y Y 06 30 2015	
Mailing Address PO BOX 996		Amount of Each Disbursement this Period 139.28	
City WILSON	State NC	Zip Code 27894	Transaction ID : SB.114
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. THE MONOCLE		Date of Disbursement M M D D / Y Y Y 06 30 2015	
Mailing Address 107 D ST NE		Amount of Each Disbursement this Period 122.25	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB.321 [MEMO ITEM]
Purpose of Disbursement CATERING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. UBER TECHNOLOGIES		Date of Disbursement M M D D Y Y Y 06 30 2015	
Mailing Address 182 HOWARD ST STE 8		Amount of Each Disbursement this Period 6.52	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.318 [MEMO ITEM]
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	139.28
TOTAL This Period (last page this line number only).....	

201507150200185082

**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 96 OF 130			
	<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)
Ted Cruz for Senate

A. UBER TECHNOLOGIES		Date of Disbursement	
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y	
Mailing Address 182 HOWARD ST STE 8		06 / 30 / 2015	
City SAN FRANCISCO State CA Zip Code 94105		Amount of Each Disbursement this Period	
Purpose of Disbursement TRAVEL		, , 3.21	
Candidate Name		Transaction ID : SB.319	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

B. UBER TECHNOLOGIES		Date of Disbursement	
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y	
Mailing Address 182 HOWARD ST STE 8		06 / 30 / 2015	
City SAN FRANCISCO State CA Zip Code 94105		Amount of Each Disbursement this Period	
Purpose of Disbursement TRAVEL		, , 7.30	
Candidate Name		Transaction ID : SB.320	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

C. BUDGET RENT A CAR		Date of Disbursement	
Full Name (Last, First, Middle Initial)		M M / D D / Y Y Y Y	
Mailing Address 6 SYLVAN WAY		04 / 06 / 2015	
City PARSIPPANY State NJ Zip Code 07054		Amount of Each Disbursement this Period	
Purpose of Disbursement TRAVEL		, , 12.90	
Candidate Name		Transaction ID : SB.15	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	, , 12.90
TOTAL This Period (last page this line number only).....	, , .

201507150200185083

**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 97 OF 130
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. CAPITAL GRILLE		Date of Disbursement M M D D Y Y 06 19 2015	
Mailing Address 1000 DARDEN CENTER DR		Amount of Each Disbursement this Period 361.30	
City ORLANDO	State FL	Zip Code 32837	Transaction ID : SB.16
Purpose of Disbursement CATERING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M D D Y Y 04 28 2015	
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 72.42	
City TYSONS CORNER	State VA	Zip Code 22182	Transaction ID : SB.17
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y 05 26 2015	
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 7.64	
City TYSONS CORNER	State VA	Zip Code 22182	Transaction ID : SB.18
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	441.36
TOTAL This Period (last page this line number only).....	

201507150200185084

**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 98 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M D D Y Y 06 22 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 7.14 Transaction ID : SB.19
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M D D Y Y 05 03 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 1509.75 Transaction ID : SB.20
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M D D Y Y 06 16 2015
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 836.10 Transaction ID : SB.21
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2352.99
TOTAL This Period (last page this line number only).....	

201507150200185085

**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 99 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. COMPLIANCE CONSULTING LLC		Date of Disbursement
Mailing Address PO BOX 365		M M / U D / Y Y 06 / 10 / 2015
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING	Candidate Name	Amount of Each Disbursement this Period 3250.00
Category/ Type		Transaction ID : SB.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COURAGEOUS MEDIA LLC		Date of Disbursement
Mailing Address 2305 N. LINCOLN STREET		M M / D D / Y Y 04 / 13 / 2015
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Candidate Name	Amount of Each Disbursement this Period 17000.00
Category/ Type		Transaction ID : SB.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ELAVON		Date of Disbursement
Mailing Address ONE CONCOURSE PKWY STE 300		M M / D D / Y Y 04 / 02 / 2015
City ATLANTA	State GA	Zip Code 30328
Purpose of Disbursement CREDIT CARD MERCHANT FEE	Candidate Name	Amount of Each Disbursement this Period 93.47
Category/ Type		Transaction ID : SB.27
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20343.47
TOTAL This Period (last page this line number only).....	

201507150200185086

**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 100 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. ELAVON		Date of Disbursement M M D D / Y Y 05 04 / 2015
Mailing Address ONE CONCOURSE PKWY STE 300		Amount of Each Disbursement this Period 69.10 Transaction ID : SB.28
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CREDIT CARD MERCHANT FEE	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELAVON		Date of Disbursement M M D D / Y Y 06 02 / 2015
Mailing Address ONE CONCOURSE PKWY STE 300		Amount of Each Disbursement this Period 68.48 Transaction ID : SB.29
City ATLANTA State GA Zip Code 30328	Purpose of Disbursement CREDIT CARD MERCHANT FEE	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FOLEY & LARDNER LLP		Date of Disbursement M M J D Y Y 06 16 2015
Mailing Address 3000 K ST NW STE 600		Amount of Each Disbursement this Period 6402.00 Transaction ID : SB.30
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6539.58
TOTAL This Period (last page this line number only).....	

201507150200185087

**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 101 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. FREEDOM PARTNERS		Date of Disbursement MM / DD / YY 05 / 03 / 2015
Mailing Address 1515 N COURTHOUSE RD STE 610		Amount of Each Disbursement this Period 315.22 Transaction ID : SB.31
City ARLINGTON	State VA	
Purpose of Disbursement FOOD/BEVERAGES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. GOBER HILGERS PLLC		Date of Disbursement MM / DD / YY 04 / 23 / 2015
Mailing Address 1005 CONGRESS AVE SUITE 350		Amount of Each Disbursement this Period 2705.00 Transaction ID : SB.32
City AUSTIN	State TX	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. INTUIT		Date of Disbursement MM / DD / YY 05 / 08 / 2015
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 134.60 Transaction ID : SB.33
City MOUNTAIN VIEW	State CA	
Purpose of Disbursement PRINTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3154.82
TOTAL This Period (last page this line number only).....	

201507150200185088

**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 102 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y 04 22 2015	
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 42.59 Transaction ID : SB.34	
City MOUNTAIN VIEW	State CA		Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. INTUIT		Date of Disbursement M M / D D / Y Y 05 22 2015	
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 42.59 Transaction ID : SB.35	
City MOUNTAIN VIEW	State CA		Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. INTUIT		Date of Disbursement M M / D D / Y Y 06 22 2015	
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 42.59 Transaction ID : SB.36	
City MOUNTAIN VIEW	State CA		Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	127.77
TOTAL This Period (last page this line number only).....	

201507150200185089

**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 103 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. KALEO LLC		Date of Disbursement M M D D Y Y 04 23 2015	
Mailing Address PO BOX 57313			
City DES MOINES	State IA	Zip Code 50317	Amount of Each Disbursement this Period 7096.76
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type	Transaction ID : SB.41
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M D D Y Y 05 11 2015	
Mailing Address 5253 PRUE ROAD BLDG 1 STE 100			
City SAN ANTONIO	State TX	Zip Code 78240	Amount of Each Disbursement this Period 249.45
Purpose of Disbursement PAYROLL SERVICE		Category/ Type	Transaction ID : SB.47
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M D D / Y Y 04 01 2015	
Mailing Address 85 NATOMA ST, UNIT 9			
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 43.40
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	Transaction ID : SB.48
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7389.61
TOTAL This Period (last page this line number only).....	

201507150200185090

**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 104 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M D D Y Y 04 02 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 4.40	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.49
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D Y Y 04 03 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.50
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M D D Y Y 04 06 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.51
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6.40
TOTAL This Period (last page this line number only).....	

201507150200185091

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D Y Y Y 04 / 07 2015
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00 Transaction ID : SB.52
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D Y Y Y 04 / 09 2015
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 4.36 Transaction ID : SB.53
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D Y Y Y 04 / 10 2015
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00 Transaction ID : SB.54
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6.36
TOTAL This Period (last page this line number only).....	

201507150200185092

**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 106 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y 04 / 16 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00 Transaction ID : SB.55	
City SAN FRANCISCO	State CA		
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y 04 / 17 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 2.00 Transaction ID : SB.56	
City SAN FRANCISCO	State CA		
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y 04 / 20 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00 Transaction ID : SB.57	
City SAN FRANCISCO	State CA		
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4.00
TOTAL This Period (last page this line number only).....	.

201507150200185093

**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 107 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD YY 04 / 28 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 0.40	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.58
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD YY 04 / 29 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 10.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.59
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD YY 05 / 04 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.40	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.60
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11.80
TOTAL This Period (last page this line number only).....	

201507150200185094

**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 108 OF 130			
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y 05 / 11 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 3.76	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.61
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y 05 / 12 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.60	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.62
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / J D / Y Y 05 / 19 / 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 3.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.63
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	8.36
TOTAL This Period (last page this line number only).....	.

201507150200185095

**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 109 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M D D Y Y 05 20 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 1.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.64
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M D D Y Y 05 29 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 0.40	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.65
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M D D Y Y 06 04 2015	
Mailing Address 85 NATOMA ST, UNIT 9		Amount of Each Disbursement this Period 75.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB.66
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	76.40
TOTAL This Period (last page this line number only).....	

201507150200185096

**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 110 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. PIXL		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015	
Mailing Address 1845 WOODALL RODGERS FWY			
City DALLAS	State TX	Zip Code 75201	Amount of Each Disbursement this Period 844.35
Purpose of Disbursement PHOTOGRAPHY SERVICE/DELIVERY		Category/ Type	Transaction ID : SB.67
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. RESTAURANT ASSOCIATES		Date of Disbursement M M / D D / Y Y 06 / 16 / 2015	
Mailing Address DIRKSEN SENATE OFFICE BUILDING SDB			
City WASHINGTON	State DC	Zip Code 20510	Amount of Each Disbursement this Period 525.00
Purpose of Disbursement FOOD/BEVERAGES		Category/ Type	Transaction ID : SB.69
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y 05 / 05 / 2015	
Mailing Address 815-A BRAZOS STREET			
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 39.95
Purpose of Disbursement DELIVERY		Category/ Type	Transaction ID : SB.70
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1409.30
TOTAL This Period (last page this line number only).....	

201507150200185097

**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 111 OF 130

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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial)

A. THE UPS STORE

Mailing Address 815-A BRAZOS STREET

Date of Disbursement

M M D D Y Y
05 06 2015

City State Zip Code
AUSTIN TX 78701

Amount of Each Disbursement this Period

39.95

Purpose of Disbursement
DELIVERY

Transaction ID : SB.71

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

B. THE UPS STORE

Mailing Address 815-A BRAZOS STREET

Date of Disbursement

M M D D Y Y
05 08 2015

City State Zip Code
AUSTIN TX 78701

Amount of Each Disbursement this Period

62.73

Purpose of Disbursement
DELIVERY

Transaction ID : SB.72

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

C. THE UPS STORE

Mailing Address 815-A BRAZOS STREET

Date of Disbursement

M M D D Y Y
05 11 2015

City State Zip Code
AUSTIN TX 78701

Amount of Each Disbursement this Period

39.95

Purpose of Disbursement
DELIVERY

Transaction ID : SB.73

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

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

142.63

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

201507150200185098

**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 112 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 12 / 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 39.95	
City AUSTIN	State TX	Zip Code 78701	Transaction ID : SB.74
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 13 / 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 62.73	
City AUSTIN	State TX	Zip Code 78701	Transaction ID : SB.75
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y 05 / 14 / 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 39.95	
City AUSTIN	State TX	Zip Code 78701	Transaction ID : SB.76
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	142.63
TOTAL This Period (last page this line number only).....	

201507150200185099

**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 113 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M / D D	Y Y
City AUSTIN State TX Zip Code 78701		05	18 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		39.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.77	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M / D D	Y Y
City AUSTIN State TX Zip Code 78701		05	21 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		62.73	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.78	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M / D D	Y Y
City AUSTIN State TX Zip Code 78701		05	28 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		39.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.79	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	142.63
TOTAL This Period (last page this line number only).....	

201507150200185100

**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 114 OF 130	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M D D Y Y 06 01 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 39.95 Transaction ID : SB.80	
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M D D Y Y 06 02 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.04 Transaction ID : SB.81	
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D Y Y 06 03 2015	
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.04 Transaction ID : SB.82	
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY		
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	120.03
TOTAL This Period (last page this line number only).....	.

201507150200185101

**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 115 OF 130
	<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	

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement MM DD YYYY 06 08 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.04 Transaction ID : SB.83
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement MM / DD / YYYY 06 09 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 62.87 Transaction ID : SB.84
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement MM / J D / YYYY 06 11 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.04 Transaction ID : SB.85
City AUSTIN State TX Zip Code 78701	Purpose of Disbursement DELIVERY	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	142.95
TOTAL This Period (last page this line number only).....	

201507150200185102

**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)

<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M	D D Y Y
City AUSTIN State TX Zip Code 78701		06	16 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		, , 40.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.86	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M	D D Y Y
City AUSTIN State TX Zip Code 78701		06	17 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		, , 62.87	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.87	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M	D D Y Y
City AUSTIN State TX Zip Code 78701		06	22 2015
Purpose of Disbursement DELIVERY		Amount of Each Disbursement this Period	
Candidate Name		, , 38.83	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB.88	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	, , 141.74
TOTAL This Period (last page this line number only).....	, , .

201507150200185103

**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 117 OF 130
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M D D Y Y 06 23 2015	
Mailing Address 815-A BRAZOS STREET			
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 38.83 Transaction ID : SB.89
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M D D Y Y 06 25 2015	
Mailing Address 815-A BRAZOS STREET			
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 38.83 Transaction ID : SB.90
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M D D Y Y 06 29 2015	
Mailing Address 815-A BRAZOS STREET			
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 118.05 Transaction ID : SB.91
Purpose of Disbursement DELIVERY		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	195.71
TOTAL This Period (last page this line number only).....	

201507150200185104

**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)

<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 06 / 30 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.04 Transaction ID : SB.92
City AUSTIN State TX Zip Code 78701	Category/ Type	
Purpose of Disbursement DELIVERY		Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 04 / 16 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 171.15 Transaction ID : SB.93
City AUSTIN State TX Zip Code 78701	Category/ Type	
Purpose of Disbursement PRINTING		Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D Y Y Y 04 / 20 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.12 Transaction ID : SB.94
City AUSTIN State TX Zip Code 78701	Category/ Type	
Purpose of Disbursement PRINTING		Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	251.31
TOTAL This Period (last page this line number only).....	

201507150200185105

**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 119 OF 130	
	<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)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y 04 / 22 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.12 Transaction ID : SB.95
City AUSTIN	State TX	
Zip Code 78701	Purpose of Disbursement PRINTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D / Y Y 04 / 23 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.12 Transaction ID : SB.96
City AUSTIN	State TX	
Zip Code 78701	Purpose of Disbursement PRINTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y 04 / 27 / 2015
Mailing Address 815-A BRAZOS STREET		Amount of Each Disbursement this Period 40.12 Transaction ID : SB.97
City AUSTIN	State TX	
Zip Code 78701	Purpose of Disbursement PRINTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	120.36
TOTAL This Period (last page this line number only).....	

201507150200185106

**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)

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<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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M / D D	Y Y
City AUSTIN State TX Zip Code 78701		Amount of Each Disbursement this Period	
Purpose of Disbursement PRINTING		, , 40.12	
Candidate Name		Transaction ID : SB.98	
Office Sought:	Disbursement For:	Category/ Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement	
Mailing Address 815-A BRAZOS STREET		M M / D D	Y Y
City AUSTIN State TX Zip Code 78701		Amount of Each Disbursement this Period	
Purpose of Disbursement PRINTING		, , 40.12	
Candidate Name		Transaction ID : SB.99	
Office Sought:	Disbursement For:	Category/ Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. TIME WARNER CABLE		Date of Disbursement	
Mailing Address PO BOX 60074		M M / D D / Y Y Y	
City CITY OF INDUSTRY State CA Zip Code 91716		Amount of Each Disbursement this Period	
Purpose of Disbursement UTILITIES		, , 768.40	
Candidate Name		Transaction ID : SB.100	
Office Sought:	Disbursement For:	Category/ Type	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

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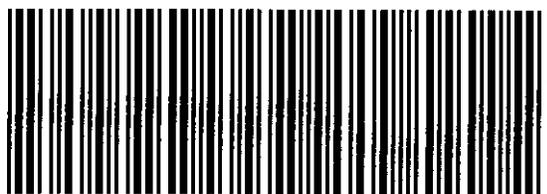
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