

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Believe In Life Liberty Yourself (BILLY PAC)

ADDRESS (number and street) 3246 E. Ridgeview Street

Check if different than previously reported. (ACC) Springfield MO 65804-5804

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00559146

3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 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 []

- (d) 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] 07 / 01 / 2014 through [MM] / [DD] / [YYYY] 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ronald Neville

Signature of Treasurer Ronald Neville [Electronically Filed] Date 04 / 27 / 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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Believe In Life Liberty Yourself (BILLY PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29222.95"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="26215.76"/>	<input type="text" value="71880.56"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="55438.71"/>	<input type="text" value="71880.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9263.45"/>	<input type="text" value="25705.3"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="46175.26"/>	<input type="text" value="46175.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Believe In Life Liberty Yourself (BILLY PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21200	21200
(ii) Unitemized	0	45650.41
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21200	66850.41
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	5000	5000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26200	71850.41
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	15.76	30.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	26215.76	71880.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26215.76	71880.56

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	2263.45	4705.3
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2263.45	4705.3
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000	19000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	2000	2000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9263.45	25705.3
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9263.45	25705.3

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26200	71850.41
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26200	71850.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2263.45	4705.3
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2263.45	4705.3

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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)
Believe In Life Liberty Yourself (BILLY PAC)

A. John Gentry
Full Name (Last, First, Middle Initial)

Mailing Address 3049 S Arcadia Avenue

City Springfield	State MO	Zip Code 65804-4556
---------------------	-------------	------------------------

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

Name of Employer Positronic Ind.	Occupation President
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2600**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : 12-39-c

Amount of Each Receipt this Period
2000

Donation

B. Vickie Petersen
Full Name (Last, First, Middle Initial)

Mailing Address 5276 S Stirling Way

City Springfield	State MO	Zip Code 65809-4647
---------------------	-------------	------------------------

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

Name of Employer Missouri State University	Occupation Director
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : 39-43-c

Amount of Each Receipt this Period
2000

Donation

C. Roy Pfautch
Full Name (Last, First, Middle Initial)

Mailing Address 52 Portland Place

City Saint Louis	State MO	Zip Code 63108-1242
---------------------	-------------	------------------------

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

Name of Employer Civic Services, Inc.	Occupation Owner
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2600**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : 35-37-c

Amount of Each Receipt this Period
2600

Donation

SUBTOTAL of Receipts This Page (optional).....▶	6600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)
A. Harry Baker

Mailing Address PO Box 217

City Omaha State AR Zip Code 72662-0217

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4000**

Date of Receipt **08 / 04 / 2014**

Transaction ID : 7-42-c

Amount of Each Receipt this Period **2000**

Donation

Full Name (Last, First, Middle Initial)
B. Gregg Hartley

Mailing Address 857 Cedar Drive

City Deale State MD Zip Code 20751-9613

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

Name of Employer Cassidy and Associates Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **07 / 10 / 2014**

Transaction ID : 31-28-c

Amount of Each Receipt this Period **1000**

Donation

Full Name (Last, First, Middle Initial)
C. Abigail Rose

Mailing Address 6108 S San Rosa Avenue

City Ozark State MO Zip Code 65721-6733

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

Name of Employer Pinegar Chevrolet Occupation Marketing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4600**

Date of Receipt **07 / 30 / 2014**

Transaction ID : 38-41-c

Amount of Each Receipt this Period **4600**

Donation

SUBTOTAL of Receipts This Page (optional)..... ▶ **7600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Believe In Life Liberty Yourself (BILLY PAC)

A. Leon Combs
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 60
City Bradleyville State MO Zip Code 65614-0060
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000

Date of Receipt 07 / 29 / 2014
Transaction ID : 37-40-c
Amount of Each Receipt this Period 1000
Donation

B. Louis Griesemer
Full Name (Last, First, Middle Initial)
Mailing Address 4824 S Bellhurst Avenue
City Springfield State MO Zip Code 65804-7594
FEC ID number of contributing federal political committee. **C**
Name of Employer Springfield Underground Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000

Date of Receipt 07 / 24 / 2014
Transaction ID : 36-38-c
Amount of Each Receipt this Period 5000
Donation

C. Gordon Kinne
Full Name (Last, First, Middle Initial)
Mailing Address 1650 E Battlefield Street Suite 300
City Springfield State MO Zip Code 65804-3733
FEC ID number of contributing federal political committee. **C**
Name of Employer Med-Pay Inc Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000

Date of Receipt 08 / 04 / 2014
Transaction ID : 40-44-c
Amount of Each Receipt this Period 1000
Donation

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	21200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)
A. Express Scripts Inc Political Action Committee

Mailing Address 1 Express Way

City State Zip Code
Saint Louis MO 63121-1824

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 05 / 2014
Transaction ID : 42-45-c

Amount of Each Receipt this Period
5000

Donation

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Aristotle International

Mailing Address 3625 Ruffin Road
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement
Campaign Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-16-55-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NPC DialPay

Mailing Address 7851 185th Street

City Tinley Park State IL Zip Code 60477-6248

Purpose of Disbursement
Processing Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-32-56-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NPC DialPay

Mailing Address 7851 185th Street

City Tinley Park State IL Zip Code 60477-6248

Purpose of Disbursement
Processing Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-32-54-e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Aristotle International

Mailing Address 3625 Ruffin Road
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement
Campaign Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-16-53-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Aristotle International

Mailing Address 3625 Ruffin Road
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement
Campaign Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-16-52-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Aristotle International

Mailing Address 3625 Ruffin Road
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement
Campaign Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-16-57-e

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Aristotle International

Mailing Address 3625 Ruffin Road
Suite 100

City San Diego State CA Zip Code 92123-1841

Purpose of Disbursement
Campaign Software

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-16-51-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NPC DialPay

Mailing Address 7851 185th Street

City Tinley Park State IL Zip Code 60477-6248

Purpose of Disbursement
Processing Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-32-50-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Lee Terry for Congress

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154-0098

Purpose of Disbursement
Campaign Contribution

011

Candidate Name

Lee Terry

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

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

Transaction ID : SB23-44-47-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Friends of Nan Hayworth

Mailing Address PO Box 511

City Chester State NY Zip Code 10918-0511

Purpose of Disbursement
Political Contribution: Donation

011

Candidate Name

Nan Hayworth

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

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

Transaction ID : SB23-46-60-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Coffman for Congress

Mailing Address 4950 S Yosemite Street
511

City Greenwood Village State CO Zip Code 80111-1349

Purpose of Disbursement
Campaign Donation

011

Candidate Name

Michael Coffman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

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

Transaction ID : SB23-25-49-e

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Chris Gibson for Congress

Mailing Address 2532 Route 9H

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement
Campaign Donation

011

Category/
Type

Candidate Name

Chris Gibson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : SB23-43-46-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. Dold For Congress

Mailing Address PO Box 6312

City Libertyville State IL Zip Code 60048-6312

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : SB23-45-48-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2000.00

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

5000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Believe In Life Liberty Yourself (BILLY PAC)

Full Name (Last, First, Middle Initial)

A. Friends for Jered Taylor

Mailing Address 702 Prospect Street

City Nixa State MO Zip Code 65714-8305

Purpose of Disbursement
State Rep Donation

011

Candidate Name
Jered Taylor

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB29-47-59-e

Amount of Each Disbursement this Period

1000

(For State/Local Candidate Support)

Full Name (Last, First, Middle Initial)

B. Ellison for Missouri

Mailing Address 1045 S New Avenue

City Springfield State MO Zip Code 65807-1346

Purpose of Disbursement
State Rep. Donation

011

Candidate Name
Fred Ellison

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB29-48-58-e

Amount of Each Disbursement this Period

1000

(For State/Local Candidate Support)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

2000.00

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

2000.00
